



COMMONWEALTH of VIRGINIA

DEPARTMENT OF SOCIAL SERVICES

OCT 21 2003

TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF) PROGRAM

TANF Transmittal 23

This transmittal contains changes and clarifications to the Temporary Assistance for Needy Families (TANF) Program policy. The revisions are listed below followed by a discussion of the changes by topic.

- A. Tables of Contents
- B. Intentional Program Violations
- C. Sixty-Month Clock
- D. Living in the Home
- E. Resources
- F. Medical Exams
- G. TANF Match Payments
- H. Educational Income
- I. Lump Sum Income
- J. Stepparent Deeming
- K. Reporting Requirements
- L. Virginia Legal Aid Projects
- M. Case Transfers
- N. Overpayments
- O. Twenty-Four Month Limit for TANF Eligibility
- P. Virginia Initiative for Employment Not Welfare Annual Plan
- Q. Index
- R. Miscellaneous

- A. Tables of Contents - Tables of contents have been updated to mirror the revisions made in this transmittal, correct prior omissions, and identify obsolete sections. Changes have been made on pages 1, 3, 5, and 8 of the main Table of Contents; Chapter 100, Table of Contents, page 1; Chapter 200, Table of Contents, page 2; Chapter 300, Table of Contents, pages 1 and 2; Chapter

400, Table of Contents, page 1; the Procedures, Introduction; and the Procedures, Table of Contents, page 1. A heading has been added to Section 401.4.E, page 9, IPV Notice Requirements, so that this section can be identified in the tables of contents.

- B. Intentional Program Violations (IPV) - Policy has been amended regarding individuals who intentionally provide misleading information to become eligible for assistance. The definition of an intentional program violation in Section 102.1, page 1, has been modified to clarify that TANF IPV policy applies to diversionary as well as cash assistance. A statement has been added to Section 102.3, page 3, to clarify that when an IPV has occurred while the application is pending and the individual has waived the right to an administrative disqualification hearing, the individual's needs are excluded when determining eligibility and the payment amount. A reference to Section 102.3 has been added in Section 801.6, page 2, to clarify that it applies to diversionary assistance as well as TANF cases.
- C. Sixty-Month Clock - In Section 201.1, page 3b, Example 1 has been clarified by adding that months accrued on a client's 60-month clock in another state are counted on the client's federal 60-month clock in Virginia. Five examples have been added to Section 201.1, pages 3b - 3c, to further clarify when months count toward the 60-month clock.
- D. Living in the Home - Section 201.5.B contains minor revisions concerning temporary absence policy. A caretaker, whether the parent or another specified relative, must report to the local department of social services when a child is expected to be out of the home for 45 days or longer. The child's eligibility may continue while absent from the home when good cause exists. Good cause includes hospitalization, education, training, and a vacation or visit. The requirement to obtain approval of good cause has been removed from policy. Also in this section, the time frame for reporting that a child has left the home has been brought in line with the time frame for reporting required changes contained in Section 401.2.B.2.
- E. Resources - Resources have been eliminated in determining initial and ongoing TANF eligibility. This program simplification measure is a significant step in the Department's efforts to ease administration of benefit programs. The change will reduce the burden on clients as well as eligibility workers in establishing TANF eligibility. Section 303, including Appendix 1 to Section 303, and Procedures Section V have been deleted from the TANF Manual. In addition, references to resource requirements have been removed from Sections 102.3 - 102.4, page 3; 201.12, page 8; 203.1, page 1; 203.2 - 203.4, page 3; 302.6, pages 2 and 3 - 4b; 302.8, page 6a; 305.2, page 13; 305.4, pages

24b - 26; 305.4, page 29; 305.4, page 32; 305.4, page 32b; 305.4, pages 44 - 45; 401.1, page 1; 401.2, pages 2 - 2a; 401.2, pages 2c - 2e; 401.3, page 6b; 401.4 - 401.5, pages 10 - 13; 401.5, pages 11 - 12; 402.1, page 1; 503.3, page 1a; 503.7, page 2 - 2c; 503.8, page 3; 503.9, page 5; 801.4, page 1; 901.8, page 8; and Procedures Section IV, page 4.

All periods of ineligibility imposed due to an improper property transfer or a nine-month real property disposition period will expire November 30, 2003.

- F. Medical Exams - Section 304.3, Medical Exams for TANF Recipients, which was inadvertently deleted in TANF Transmittal 22, has been added back.
- G. TANF Match Payments (TMP) - Sections 105.2 and 304.4 clarify that match payments may be issued during suspensions, VIEW sanctions, and during the appeal process when TANF benefits are continued. Issuance of match payments in these situations is dependent upon the Division of Child Support Enforcement collecting current child support in excess of \$50 two months prior to the TMP payment month. If a case closes, TMPs may continue for two months after closure. TANF match payments will be issued beginning November 1, 2003.

Hold harmless policy, which is no longer applicable, has been deleted from Sections 304.1, page 1a, 502.1, page 1, and Procedures, Section VI, pages 1-2.

- H. Educational Income - Section 305.4, pages 22 - 24b, brings TANF educational income policy in line with Food Stamp educational income policy by exempting all money received for educational purposes. This change is also reflected in revisions to Procedures Section VII, page 4.
- I. Lump Sum Income - In Transmittal 22, a reference to disbursements of excess support collected was removed since the Division of Child Support Enforcement no longer makes these payments. Another reference to disbursement of excess support has been deleted from lump sum policy in Section 305.4.C, page 25.
- J. Stepparent Deeming - Stepparent income is not deemed when the parent of the TANF child is not living in the home. Section 305.4.F, pages 37 and 39, have been revised to reflect this policy.
- K. Reporting Requirements - In Section 102.2.A, the examples of changes required to be reported have been deleted.

Section 305.1, page 11, clarifies the reporting time frame for changes required to be reported. Although the standard reporting time frame is 10 calendar days from the date the change occurs or becomes known, the change is reported timely as long as it is reported by the tenth day of the month following the month of the change.

Policy in Sections 401.2, pages 2a - 2b, 401.3, page 6b, 401.5, page 10, and 503.7, page 2c, has been revised to add a third type of change that must be reported. Effective December 1, 2003, TANF recipients must report when an eligible child leaves the home. The change must be reported within 10 days but no later than the tenth of the month following the month the child left the home. Other assistance unit changes are not required to be reported until the next renewal or Interim Report filing. While it is desirable to align TANF program requirements with Food Stamp requirements, TANF law and regulations require the recipient to report when a child has left the home. In Section 401.2, page 2b, the first paragraph has been reworded to clarify that eligibility factors reported at renewal and on an Interim Report, as well as changes reported between renewals and Interim Reports, must be substantiated.

A fifth type of cases exempted from Interim Report filing has been added at Section 401.3.H.1.e, page 6a. Payee-only cases are exempt from interim reporting requirements, provided the payee is a specified relative other than a parent required to be in the assistance unit, such as a parent receiving Supplemental Security Income (SSI). Payee-only cases approved or reviewed on or after December 1, 2003, must be identified in ADAPT as exempt from interim reporting. Payee cases identified in ADAPT as nonexempt must be changed to exempt no later than the next scheduled Interim Report filing. A wording revision has been made in Section 401.3.H.1.d. to more clearly indicate when migrant or seasonal farmworkers are exempt from the interim reporting requirement.

The Change Report (032-03-051) developed for use with the reporting requirements implemented July 1, 2003, is now referenced in Section 401.5, page 10a, which identifies information that must be given to applicants and recipients.

- L. Virginia Legal Aid Projects – A list of legal aid organizations in Virginia is available in the Food Stamp Manual. Appendix 1 to Chapter 400 has been updated to identify the policy section in the Food Stamp Manual where the list is located. A link has been established between Chapter 400, Appendix 1, and the list maintained in the Food Stamp Manual, Volume V, Part XIX, Appendix I, in the online manuals.

- M. Transferring the Case –Agencies will no longer be required to complete a full redetermination on transferred in cases. Section 502.6, page 7, has been changed to require a desk review only. This change aligns policy for the receiving locality with Interim Reporting policy.
- N. Overpayments - An example has been revised in Section 503.7.F, page 2c, to comport with the requirement in Section 401.2.B.2 to report when an eligible child leaves the home.
- O. Twenty-Four Month Limit for TANF Eligibility - A change has been made in Section 901.9 to clarify that the eligibility worker is responsible for entering in ADAPT the date that the Agreement of Personal Responsibility is signed. This date triggers the VIEW time clock.
- P. Virginia Initiative For Employment Not Welfare (VIEW) Annual Plan - The VIEW Annual Plan included in this transmittal replaces the Plan currently in Chapter 1000, Appendix D, which is incomplete. The updated plan is also on the intranet as a broadcast (#2203), dated June 23, 2003.
- Q. Index - References to resources and other obsolete policies have been deleted from the Index.
- R. Miscellaneous - References to six-month reviews have been removed in Sections 401.2.C, page 2e; 502.7.D, page 9; and 901.14, page 11.

A word omission has been corrected in Procedures Section VII, page 5. Veteran's benefits for educational purposes paid to individuals 18 and older may be verified by the award letter or the benefit payment check.

Code of Virginia citations have been updated in Sections 305.4, page 24b; 503.8, page 3; and 801.1, page 1.

Section 102.2, page 1a, is a runover page and has no changes.

The transmittal is effective December 1, 2003, unless otherwise specified. Insert the attached pages as follows:

Table of Contents, pages 1, 3, 5, and 8, dated 12/03 (4 sheets), to replace Table of Contents, pages 1, 3, 5, and 8, dated 10/02, 10/00, 7/03, and 3/00, respectively (4 sheets).

Chapter 100, Table of Contents, page 1, dated 12/03 (1 sheet), to replace Chapter 100, Table of Contents, page 1, dated 7/03 (1 sheet).

Sections 102.1 - 102.2, pages 1 - 1a, dated 12/03 (2 sheets), to replace Sections 102.1 - 102.2, pages 1 - 1a, dated 4/03 (2 sheets).

Sections 102.3 - 102.4, page 3, dated 12/03 (1 sheet), to replace Sections 102.3 - 102.4, page 3, dated 4/03 (1 sheet).

Section 105.2, page 3, dated 12/03 (1 sheet), to replace Section 105.2, page 3, dated 4/03 (1 sheet).

Chapter 200, Table of Contents, page 2, dated 12/03 (1 sheet), to replace Chapter 200, Table of Contents, page 2, dated 7/03 (1 sheet).

Sections 201.1 - 201.2, pages 3b - 3c, dated 12/03 (2 sheets), to replace Sections 201.1 - 201.2, page 3b - 3c, dated 7/03, (2 sheets).

Section 201.5, page 2, dated 12/03 (1 sheet), to replace Section 201.5, page 2, dated 4/03 (1 sheet).

Section 201.12, page 8, dated 12/03 (1 sheet), to replace Section 201.12, page 8, dated 7/00 (1 sheet).

Section 203.1, page 1, dated 12/03 (1 sheet), to replace Section 203.1, page 1, dated 7/99 (1 sheet).

Sections 203.2 - 203.4, page 3, dated 12/03 (1 sheet), to replace Sections 203.2 - 203.4, page 3, dated 12/80 (1 sheet).

Chapter 300, Table of Contents, pages 1 - 2, dated 12/03 (2 sheets), to replace Chapter 300, Table of Contents, pages 1 - 2, dated 7/03 (2 sheets).

Section 302.6, page 2, dated 12/03 (1 sheet), to replace Section 302.6, page 2, dated 1/03 (1 sheet).

Section 302.6, page 3, dated 12/03 (1 sheet), to replace Section 302.6, page 3, dated 10/02 (1 sheet).

Section 302.6, pages 4 - 4b, dated 12/03 (3 sheets), to replace Section 302.6, pages 4 - 4b, dated 10/99, 4/03, and 4/03, respectively (3 sheets).

Sections 302.7 - 302.8, page 6a, dated 12/03 (1 sheet), to replace Sections 302.8, page 6a, dated 10/94 (1 sheet).

Section 303, page 1, dated 12/03 (1 sheet), to replace the entire Section 303, including Appendix 1 to Section 303.

Sections 304.2 - 304.4, pages 1a - 2, dated 12/03 (2 sheets), to replace Sections 304.2 - 304.4, page pages 1a - 2, dated 7/03 (2 sheets).

Section 305.1, page 11, dated 12/03 (1 sheet), to replace Section 305.1, page 11, dated 7/03 (1 sheet).

Section 305.2, page 13, dated 12/03 (1 sheet), to replace Section 305.2, page 13, dated 4/03 (1 sheet).

Section 305.4, pages 22 - 26, dated 12/03 (9 sheets), to replace Section 305.4, pages 22 - 26, dated 7/95, 6/01, 10/99, 5/99, 10/02, 7/03, 7/03, 4/94, and 6/01, respectively (9 sheets).

Section 305.4, page 29, dated 12/03 (1 sheet), to replace Section 305.4, page 29, dated 7/93 (1 sheet).

Section 305.4, page 32, dated 12/03 (1 sheet), to replace Section 305.4, page 32, dated 6/01 (1 sheet).

Section 305.4, page 32b, dated 12/03 (1 sheet), to replace Section 305.4, page 32b, dated 6/01 (1 sheet).

Section 305.4, page 37, dated 12/03 (1 sheet), to replace Section 305.4, page 37, dated 5/99 (1 sheet).

Section 305.4, page 39, dated 12/03 (1 sheet), to replace section 305.4, page 39, dated 7/03 (1 sheet).

Sections 305.4 - 305.5, pages 44 - 45, dated 12/03 (2 sheets), to replace Sections 305.4, pages 44 - 45, dated 7/03 and 4/03, respectively (2 sheets).

Chapter 400, Table of Contents, page 1, dated 12/03 (1 sheet), to replace Chapter 400, Table of Contents, page 1, dated 7/03 (1 sheet).

Section 401.1, page 1, dated 12/03 (1 sheet), to replace Section 401.1, page 1, dated 5/99 (1 sheet).

Section 401.2, pages 2 - 2e, dated 12/03 (6 sheets), to replace Section 401.2, pages 2 - 2e, dated 7/99, 7/03, 7/03, 7/03, 7/03, and 7/03, respectively (6 sheets).

Section 401.3, pages 6a - 6b, dated 12/03 (2 sheets), to replace Section 401.3, pages 6a - 6b, dated 7/03 (2 sheets).

Sections 401.4 - 401.6, pages 9 - 13, dated 12/03 (6 sheets), to replace Sections 401.4 - 401.6, pages 9 - 13, dated 7/03, 7/03, 7/03, 10/02, 10/02, and 7/03, respectively (6 sheets).

Section 402.1, page 1, dated 12/03 (1 sheet), to replace Section 402.1, page 1, dated 7/00 (1 sheet).

Chapter 400, Appendix I, page 1, dated 12/03 (1 sheet), to replace Chapter 400, Appendix I, page 1, dated 7/94 (1 sheet).

Section 502.1, page 1, dated 12/03 (1 sheet), to replace Section 502.1, page 1, dated 7/03 (1 sheet).

Section 502.6, page 7, dated 12/03 (1 sheet), to replace Section 502.6, page 7, dated 7/99 (1 sheet).

Section 502.7, page 9, dated 12/03 (1 sheet), to replace Section 502.7, page 9, dated 5/99 (1 sheet).

Sections 503.2 - 503.7, pages 1a - 2c, dated 12/03 (5 sheets), to replace Sections 503.2 - 503.7, pages 1a - 2c, dated 4/03, 4/03, 7/00, 10/00, and 7/03, respectively (5 sheets).

Section 503.8, page 3, dated 12/03 (1 sheet), to replace Section 503.8, page 3, dated 4/03 (1 sheet).

Sections 503.9 - 503.10, page 5, dated 12/03 (1 sheet), to replace Sections 503.9 - 503.10, page 5, dated 4/96 (1 sheet).

Sections 701.3 - 701.4, page 2, dated 12/03 (1 sheet), to replace Sections 701.3 - 701.4, page 2, dated 3/00 (1 sheet).

Sections 801.1 - 801.6, pages 1 - 2, dated 12/03 (2 sheets), to replace Sections 801.1 - 801.6, pages 1 - 2, dated 10/02 (1 sheet).

Chapter 900, Table of Contents, page 1, dated 12/03 (1 sheet), to replace Chapter 900, Table of Contents, page 1, dated 7/03 (1 sheet).

Sections 901.7 - 901.9, pages 8 - 8a, dated 12/03 (2 sheets), to replace Sections 901.7 - 901.9, pages 8 - 8a, dated 7/03 and 10/00, respectively (2 sheets).

Sections 901.13 - 901.14, page 11, dated 12/03 (1 sheet), to replace Sections 901.13 - 901.14, dated 7/03 (1 sheet).

Chapter 1000, Appendix D, pages 1 - 13, dated 12/03 (13 sheets) to replace Chapter 1000, Appendix D, pages 1-7, dated 10/00 (7 sheets).

Procedures, Introduction, page 1, dated 12/03 (1 sheet), to replace Procedures, Introduction, page 1, dated 7/03 (1 sheet).

Procedures, Table of Contents, page 1, dated 12/03 (1 sheet), to replace Procedures, Table of Contents, page 1, dated 7/03 (1 sheet).

Procedures, Section IV, page 4, dated 12/03 (1 sheet), to replace Procedures, Section IV, page 4, dated 1/97 (1 sheet).

Procedures, Section V, page 1, dated 12/03 (1 sheet), to replace the entire Procedures, Section V.

Procedures, Section VI, page 1, dated 12/03 (1 sheet), to replace Procedures, Section VI, pages 1 – 2, dated 7/03 (2 sheets).

Procedures, Section VII, pages 4 - 5, dated 12/03 (2 sheets), to replace Procedures, Section VII, pages 4 - 5, dated 7/95, 7/92, and 7/91, respectively (3 sheets).

Index, pages 1 - 3, dated 12/03 (3 sheets), to replace Index, pages 1 - 3, dated 7/00 (3 sheets).

Index, pages 5 - 12, dated 12/03 (8 sheets), to replace Index, pages 5 - 12, dated 7/00, 10/00, 7/03, 7/03, 7/03, 7/00, 10/00, and 7/00, respectively (8 sheets).

Index, pages 14 - 16, dated 12/03 (3 sheets), to replace Index, pages 14 - 16, dated 7/00, 4/03, and 4/03, respectively (3 sheets).



S. Duke Storen, Director
Division of Benefit Programs

Attachment

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INTENTIONAL PROGRAM VIOLATION12/03102.1 - 102.2

102.1 DEFINITION - "Intentional Program Violation (IPV)" means any action by an individual for the purpose of: 1) establishing or maintaining the family's eligibility for Temporary Assistance for Needy Families (TANF)* **(diversionary and ongoing assistance)** or Virginia Initiative for Employment not Welfare (VIEW); or 2) increasing or preventing a reduction in the amount of the grant; or 3) establishing eligibility for VIEW supportive or transitional services.** For an IPV to exist, the action by the individual must be: 1) an intentionally false or misleading statement or misrepresentation; 2) concealment or withholding of facts; or 3) any act intended to mislead, misrepresent, conceal or withhold facts or propound a falsity.*** Whoever obtains or attempts to obtain, or aids or abets any person in obtaining, by means of a willful statement or representation, or by impersonation, or other fraudulent device, assistance or benefits from TANF and other programs designated under rules and regulations of the State Board of Social Services is committing an IPV.

102.2 RESPONSIBILITIES OF LOCAL DEPARTMENTS - The local agency has the following responsibilities in relation to IPV:

- A. During the TANF application and VIEW assessment the agency must ensure and document that a clear and full explanation is given to the applicant/recipient of the eligibility requirements for the type of assistance and services being requested or received; of his responsibility to give complete and accurate information related to his eligibility and to report promptly and fully any changes in his circumstances; and of the provisions of the law with respect to knowingly giving false information or deliberately withholding information which would affect his eligibility for assistance or the amount thereof. The worker must explain fully to the recipient what types of changes in his circumstances would have an effect on the grant and services provided. At TANF application, the agency must explain IPV to the applicant/recipient and explain the Notice of Intentional Program Violation Penalties. This form may be found on the local agency DSS Intranet site (www.localagency.dss.state.va.us). A copy is to be given to the applicant/recipient and a copy is filed in the eligibility record. **The assistance unit must report all required changes within 10 calendar days from the date the unit knows of the change but is reported timely if reported by the tenth of the following month.**
- B. The local agency must conduct an investigation of an allegation that an individual committed an intentional program violation, regardless of the TANF payment or VIEW Program status. A determination as to whether an IPV has occurred must be based on careful consideration of the particular circumstances. A determination must be made that there has been a deliberate misrepresentation on the part of the applicant/recipient. Consideration should be given to: (1) whether the incorrect or unreported information was, in fact, known to the applicant/recipient and (2) whether the applicant/recipient understood the eligibility and reporting requirements.

* 45 CFR 235.112

** 2002 Acts of Assembly, Item 362

*** Code of Virginia 63.2-522

- C. The local agency is required to proceed against any individual alleged to have committed an intentional program violation by referring the matter to the appropriate authorities for criminal action in a federal or state court or through an administrative disqualification hearing (ADH).

An individual may be charged with an IPV even if the application was denied. An overpayment does not have to exist for there to be a determination of an IPV. Individuals may be charged with an IPV for VIEW even if supportive or transitional services have not yet been received. For a VIEW IPV the agency is not to terminate future supportive or transitional services if those services are needed to assist the client to maintain employment.

The local agency may refer a case for prosecution or initiate an ADH regardless of the current eligibility of the individual.

- D. The local agency must coordinate its actions with any corresponding actions being taken against the individual under the Food Stamp Program if the factual issues involved arise out of the same or related circumstances.

- A. Only the individual found guilty of committing an IPV shall be disqualified. The local agency shall not take the individual's needs into account when determining the assistance unit's need and the amount of assistance. However, if the individual is a parent, any income of the disqualified parent must be considered available to the assistance unit. (See Section 305.4) **NOTE: When an IPV occurs and the Waiver of Administration Disqualification Hearing (032-03-722) is signed while the application is pending, the disqualified individual's needs are excluded when determining a diversionary assistance payment.**
- B. The period of disqualification must begin no later than the second month following the month of the court's decision of guilty, the date the waiver notice is received by the local agency, or the date the Administrative Disqualification Hearings Decision Notice is issued by the hearing officer. If the individual is not eligible for TANF at the time the disqualification is to begin, the period must be postponed until the individual applies for and is determined eligible for benefits. The disqualification period must run uninterrupted until it expires.

The disqualification penalty must be in addition to, and cannot be substituted for, any other sanctions or penalties which may be imposed by the court for the same offense. The disqualification penalty cannot substitute for other sanctions under the TANF program.

Any period for which a disqualification period is imposed will remain in effect, without possibility of an administrative stay, unless and until the finding upon which the penalty was based is subsequently reversed by a court of appropriate jurisdiction. In no event shall the duration of the period for which such penalty is imposed be subject to review in a fair hearing.

- C. An individual convicted in state or federal court of fraudulently misrepresenting his address to receive benefits in two or more states is ineligible to receive TANF for 10 years. Benefits refer to TANF, Medicaid, and Food Stamps. The 10 year period begins on the date the individual is convicted.*

102.4 ADMINISTRATIVE DISQUALIFICATION HEARINGS (ADH) - An administrative disqualification hearing is an impartial review by a hearing officer of an individual's actions involving an alleged IPV for the purpose of rendering a decision of guilty or not guilty of committing an IPV.**

In order to request an ADH, the local agency shall ensure that a pre-hearing investigation has occurred and that the evidence supports the charge of intentional program violation. There must be clear and convincing evidence which demonstrates the individual committed or intended to commit a TANF, or VIEW IPV. Examples of evidence include but are not limited to:

- A. Written verification of unreported income received by the individual; or

* Code of Virginia 63.2-522

** 45 CFR 235.113

Note: A TANF recipient may receive match payments during the appeal process provided the case remains open. Receipt of TANF match payments is contingent upon collection of current child support by DCSE two months prior to the month a payment is issued. If the decision of the agency is upheld, only the TANF benefit amount is an overpayment.

In the event the hearing decision is adverse to the recipient, the method of collection is that prescribed for recoupment and recovery of overpayments set forth at Section 503.8.*

The requirement for filing an appeal or requesting a local agency conference is met if the request for a conference is made within 10 days of receipt of the Advance Notice of Proposed Action or a fair hearing request is received by the State or local agency, or postmarked, by the effective date of the change. The same time frame for filing an appeal applies in situations where the assistance unit is homeless and it is agreed that all notices will be available to the client at the local agency.

Upon notification by the hearing officer, the agency shall inform the claimant in writing that assistance is being continued in the same amount pending the hearing decision unless there are subsequent changes in the claimant's situation. (Refer to 106.1 E)

The following procedures are established to assure that assistance is continued without interruption in every case where a recipient has filed a valid appeal prior to the effective date of the proposed change:

If the effective date for checks occurs more than 10 days but within 15 days of the date on which the Advance Notice of Proposed Action is mailed (excluding the date of postmark) and

- A. The proposed action is to terminate or suspend assistance, the assistance check is not mailed but must be available for same day issuance in the event an appeal is filed or a conference is requested within the 10-day advance notice period.
- B. In cases of proposed action to reduce assistance, a check in the reduced amount is issued, but the difference between the reduced amount and the prior amount must be available for same day issuance in the event a timely appeal is filed or a conference is requested.

The 15-day period is provided to allow time for mail delivery and possible weekend or holiday delays in the event an appeal is filed or a conference requested toward the end of the advance notice period.

* 45 CFR 233.20(a)(13)

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- 4) Months during which the adult lived on an Indian reservation or in an Alaskan Native village if, during the month;
 - (a) at least 1,000 individuals were living on the reservation or in the village; and
 - (b) at least 50 per cent of the adults living on the reservation or in the village were unemployed;
- 5) Months in which the case was a "control" case. (Petersburg, Portsmouth, Prince William, Wise, and Lynchburg were research sites for the VIP evaluation. Cases in these localities were assigned a research or control status.)

Example 1: Client moved to Virginia 7/10/00 and subsequently applied for TANF. She indicated receipt of TANF in North Carolina approximately six months prior to this application. EW contacts the local agency in North Carolina and verifies that client received TANF there from February 1999 through January 2000. The EW will add February 1999 through January 2000 to the 60-month clock **because these months are on the client's federal 60-month clock in that state.**

Example 2: Client is participating in VIEW and her clock has run from April 1999 through July 2000. On July 8, 2000 the VIEW worker placed the client in inactive status. ESW places the client back in active status on August 22, 2000. July will count as a month in the 24-month limit. August will not count because of the inactive status on the first of the month. The count will resume with the month of September.

Example 3: Client and her three children received 60 months of TANF, with the March 1, 2003 payment. The TANF case was closed effective March 31, 2003. On April 12, 2003 the client was incarcerated and her three children moved in the grandmother's household. The grandmother needed financial assistance and applied for TANF on May 1, 2003. The TANF application for the three children was approved on June 14, 2003. The children are eligible because they now live with an adult who is not included in the grant and does not have a 60-month clock. If the grandmother becomes financially needy, applies for herself, **and volunteers for VIEW**, the 60-month clock will begin to accrue.

Example 4: Client and her two children have received 60 months on her 60-month clock as the result of federal clock months from another state and/or VIEW months in Virginia. As long as the children remain in the home with this client, this family of three have reached their lifetime limit of TANF and will not be eligible again.

Example 5: The children in example #4 leave the client's home and go to live with their father. The father has not been on TANF or has been a TANF/VIEW recipient, but has less than 60-months on his clock. The father and children can receive TANF until he has reached his 60-month time limit.

Example 6: The children in example #4 leave the client's home and go to live with their grandmother. Grandmother is not in the assistance unit. She can receive TANF for the grandchildren.

Example 7: The children in example #4 leave the client's home and go to live with an aunt. The aunt applies for assistance and is in need and is included in the assistance unit as caretaker. She is found eligible to receive TANF for herself and the children. If the aunt volunteers for VIEW, her 60-month clock will accrue until she reaches the 60-month limit.

Example 8: Client receives TANF for herself and three children. The client has cycled in and out of TANF/VIEW and reaches her 24-month and 60-month limits. If the children go to live with their father or any specified relative, no one can receive TANF for the children during the two year period of ineligibility due to the VIEW limit.

201.2 AGE - The month, day, and year of the child's birth must be established and evidence thereof entered in the eligibility case record, except that, pending the securing of such evidence, assistance must not be denied an otherwise eligible child who is obviously under 12.

If the day and month cannot be established, July 1 is assumed to be the birthdate.

Continuing Eligibility*- The child is eligible until he reaches the age of 18. He is eligible for the month in which his 18th birthday falls if he has not attained the specified age on the first day of that month.

An 18 year old child may be eligible if enrolled in a secondary school or vocational/technical school of secondary equivalency if he is expected to complete the high school or vocational/technical program prior to or in the same month as his 19th birthday. The program is considered completed on the last day of final exams or, if exams are not required, the last day of

* 45 CFR 233.39(B)(ii)

Neither severance of parental rights nor adoption is considered to terminate the relationship to biological relatives. Therefore, biological relatives may receive assistance for someone who has been adopted, when there is no other relative by adoption in the home to receive assistance on the individual's behalf. However, this provision does not require individuals who have been adopted to be included in the A.U. of the biological relative and his/her children.

Example 1: Jane Doe had two children who were adopted by Jane's parents. Jane's parents died leaving their adopted children in the care of Jane. Jane is considered a biological relative for TANF purposes and can receive assistance for the two children, however, they are not to be included in the same A.U. as any other children Jane may have since she has no legal responsibility for these children.

Example 2: Mary Smith's child, Michael, was adopted by a family friend. When Michael's adoptive parent died, there was no other relative to care for him. Michael went to live with Mary. Since Mary and Michael are biologically related, she can receive assistance for him. However, Michael is not to be included in the same assistance unit as any other children Mary may have.

B. Living in a Home* - A home is the family setting maintained or in the process of being established by the specified relative, as evidenced by the presence of the child. A home exists even though the child or relative is temporarily absent from the customary family setting. The relative may be absent for reasons such as hospitalization, education or training, a vacation, or a visit. A parent that is absent from the home due to active duty in the uniformed services is considered living in the home. The child may be absent as long as the absence does not exceed 45 consecutive days, unless good cause exists. Additionally, a home may exist in situations where the assistance unit lacks a fixed home address or is otherwise considered homeless.

1. A child that has been, or is expected by the **caretaker** to be, absent from the home for a period of 45 consecutive days is ineligible for TANF. Exception: If the child is absent for longer than 45 consecutive days, the child may retain eligibility if good cause for the absence exists, such as hospitalization, **education or training, a vacation, or a visit.**

Note: The child can be eligible in another assistance unit.

2. The caretaker must report to the local agency after it becomes clear to the caretaker that the minor child will be absent from the home for 45 consecutive days. **(Refer to Section 401.2.B.2.a.3.)**
3. If the caretaker fails to report the change within the required time frame as described above, the caretaker is ineligible. The caretaker will remain ineligible until the child returns to the home or there is a break in assistance.

- D. INCOME OF THE "CAPPED" CHILD - The income of the child **is** deemed unavailable to the assistance unit.
- E. CHILDREN WHO MOVE INTO THE HOME OF THE PARENT RECEIVING TANF - A child who was not subject to the family cap provision is subsequently not subject to the provision when he moves into the parent's home.
- F. OTHER CARETAKER/RELATIVES - The family cap provision does not apply to foster parents or caretaker/relatives who are not the biological or adoptive parents of the child. A child who was subject to the family cap in the home of a parent and subsequently moves into the home of a relative may be eligible for TANF, if otherwise eligible. Exception: A child who is subject to the family cap provision and whose parent is in a period of ineligibility due to the time limit for receipt of TANF is not eligible to receive assistance with another caretaker/relative until the parent's period of ineligibility expires. (See 901.11.)
- G. DURATION OF THE FAMILY CAP - The provision applies to a "capped" child when he lives with or returns to the home of a parent after living for a period of time in another living arrangement.
- H. CLIENT NOTICE OF FAMILY CAP PROVISION - Applicants for TANF shall receive an explanation of the family cap provision at the time of application. The applicant must check the appropriate box on the last page of the Combined Application indicating that the agency has explained the provision and that they understand the provision. When the application is approved, the Client Notice of Action must inform the mother of the effective date of the specified periods described above.

The agency must explain the provision to recipients who are receiving assistance on July 1, 1995, at the next redetermination or face-to-face interview on or after July 1, 1995. After the explanation, the recipient must check the block on the last page of the Combined Application, as well as sign and date the application.

In addition, applicants and recipients must sign and date the Notice of Personal Responsibility form. The form states that the local department has explained and that the individual understands the terms of the family cap provision. The form must be signed for all applications taken on or after July 1, 1995, and at the first redetermination after July 1, 1995, and retained in the permanent document section of the TANF case record.

- I. CHILD CONCEIVED AS A RESULT OF VERIFIED RAPE OR INCEST - A child conceived as a result of verified rape or incest is not subject to the family cap provision. Birth certificates and medical or law enforcement records are required to verify rape or incest.
- J. MEDICAID COVERAGE FOR THE CHILD SUBJECT TO THE FAMILY CAP - See the Medicaid Manual, Volume XIII, Part I, Chapter F.
- K. CHILD CAPPED IN ANOTHER STATE - A family cap imposed under another state's TANF program does not affect the child's eligibility under Virginia's TANF program.

203.1 CONDITIONS OF ELIGIBILITY - Under certain conditions, federal regulations* permit the use of TANF funds to provide emergency assistance to needy families with children. The policy regarding total loss of earnings is effective only during the period of December 1, through March 31, of the following calendar year. In accordance with these regulations, the State Board has ruled that when all of the following conditions exist, EA must be granted immediately.

- A. The family includes at least one child who is under eighteen years or if 18 but not yet 19 is enrolled full time in a secondary school or vocational/technical school equivalency from which the child is expected to graduate prior to attaining age 19.
- B. The child is a resident of Virginia, as defined in Section 201.6.
- C. The child, and all members of his family for whom assistance is provided must be a citizen of the United States or, if an alien, meet requirements, specified in Section 201.7. Aliens granted lawful temporary resident status under Section 210 of the Immigration and Nationality Act (Special Agricultural Workers) are eligible to receive emergency assistance.
- D. The child is living with a relative of the degree specified in Section 201.5 A., in a place of residence maintained by the relative as his own home (See Section 201.5 B.)
- E. The emergency assistance is necessary (1) to avoid destitution of the child or (2) to provide living arrangement for him in a home (203.2).
- F. The child is without **income** immediately available to meet his needs (203.2.B).
- G. The emergency need did not arise because the child, if over 16 and out of school, or the specified relative refused without good cause to accept or continue in employment or training for employment.
- H. The child's need is the result of one of the following emergencies:
 - 1. A natural disaster or a fire which has destroyed items necessary for maintaining the household or the home itself. The emergency must have occurred within a period not to exceed one month prior to application or in the event of hospitalization of the specified relative(s) within 30 days of the emergency, application must be made within a period not to exceed two months.
 - 2. A total loss of family earnings when such loss occurs between December 1 and March 31 and the loss is due to:
 - a. Severe weather conditions, or
 - b. A reduction in a labor force caused by an energy shortage.Application must be made within one month after the emergency.

- B. AVAILABLE RESOURCES - Emergency Assistance for natural disaster or fire and total loss of earnings cannot be granted when other resources are available to meet the family's needs. This means that EA cannot be granted to a current recipient of **TANF** except in case of a disaster as specified in Section 203.1. In addition, EA cannot be granted when there is another agency in the community which is known to meet the particular need promptly in that particular type of emergency. Evidence must be entered in the case record that specific community resources have been investigated.

Income immediately available to the family must be counted in determining the amount of assistance granted. The provisions of Section 305 are generally applicable except that income disregards are not applicable.

- C. METHOD OF PAYMENT - Payment for purchase, repair, moving or storage of household equipment must be made by the vendor method to the provider of goods or services.

Payment to meet other needs may be either a money payment to the recipient or a vendor payment to the provider, whichever is most practicable and advantageous to the family.

203.3 AUTHORIZATION FOR **TANF-EA** - Emergency Assistance must be authorized during a period not to exceed thirty consecutive days within any twelve consecutive months. This thirty-day period begins with the date of the first authorization of payment by agency action. Payment may cover specified needs arising prior to the date of authorization, retroactive to the date the emergency occurred, as specified in Section 203.1 H. Payment also covers needs anticipated during the thirty-day period following the initial authorization of emergency assistance, provided it is established that such need will continue to exist for that period.

If it is established at a later date within the thirty-day period that other allowable needs exist, additional payments may be authorized within the time limit up to the maximum specified in Section 203.2.

203.4 REFERRAL FOR SERVICE - In all cases in which EA is requested, referral must be made to the service staff or other appropriate agency for the following services:

1. Information
2. Referral
3. Any other services that meet needs attributable to the emergency.

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302.6 Composition of the TANF Assistance Unit - The TANF assistance unit is required to include, when living together, the parent(s) and minor sibling(s) of a dependent child for whom assistance is requested. Therefore, each sibling living in the home of a dependent child must be evaluated to determine if he/she meets the categorical requirements listed in Section 201.1.A. This includes any sibling living in the home with both natural or adoptive parents who are also living in the home.

The assistance unit will include the following individuals:

- A. The natural or adoptive parent(s) who is living in the same home as the child for whom assistance is requested, unless otherwise indicated by policy in 302.6.D.*
- B. All blood related or adoptive siblings, including those emancipated by court order or marriage, who meet the categorical requirements of an eligible child, living in the same home as the child for whom assistance is requested.** Note: The spouse of the child emancipated by marriage cannot be living in the home for eligibility to exist.

Children who meet the categorical requirements must also meet all conditions of eligibility set forth in Section 201.1 B. in order for their needs to be included in the assistance payment. If the conditions of eligibility are not met, the child's needs will be excluded, however, any income of that child will be considered available to the remaining assistance unit members.

If categorical requirements cannot be established due to lack of verifications or the conditions of eligibility are not met, the individual will be assumed to be a required member of the assistance unit and the following will apply:

- 1. In determining need and the amount of payment for the assistance unit such individuals will be excluded.
- 2. Income of these individuals will be considered available to the assistance unit.
- 3. If verifications are subsequently provided which establish that the child is not categorically eligible, income of that child will no longer be considered available.

If verifications are subsequently provided which establish the child's categorical eligibility, his income will continue to be counted, as indicated above in 1 and 2, until all conditions of eligibility are met.

* 45 CFR 206.10(a)(1)(vii)(A)

** 45 CFR 206.10(a)(1)(vii)(B)

5. A child whose SSN has not been provided or application for an SSN has not been made. See 201.8 for the exception regarding a newborn child.
 6. A child who receives an adoption assistance maintenance payment. Exception: A child who receives an adoption assistance maintenance payment must be excluded when adding that child to the assistance unit and counting the maintenance payment reduces the TANF benefit. However, that child must be included in the assistance unit when the benefit will be increased by adding that child and his income.*
 7. A child who receives a foster care maintenance payment or whose needs are included in the foster care maintenance payment for his parent.*
 8. A child whose citizenship or alien status has not been declared in writing according to Section 201.7 C.
 9. A child subject to the family cap provision. (201.12)
 10. A child not in compliance with the compulsory school attendance requirement. (201.3)
 11. A child convicted in state or federal court of a felony offense for possession, use, or distribution of a controlled substance for conduct occurring after 8/22/96.**
 12. A child fleeing to avoid prosecution or confinement or in violation of probation or parole.**
 13. A child who is in a VIEW period of ineligibility.
 14. A child whose caretaker is in a period of ineligibility due to the receipt of a diversionary assistance payment.
- D. The following parent(s) is not included in the assistance unit:
1. The parent(s), of an eligible TANF child(ren), who is receiving SSI and/or an Auxiliary Grant.
 2. The parent who is not (1) a U. S. citizen or (2) an eligible alien.**
 3. A parent who receives an adoption assistance maintenance payment on his own behalf up to age 21. Exception: A parent who receives an adoption assistance maintenance payment must be excluded when adding that parent to the assistance unit and counting the maintenance payment reduces the TANF benefit. However, that parent must be included in the assistance unit when the benefit will be increased by adding that parent and his income.*

* Public Law 101-508 (OBRA 1990)

** Public Law 104-193

7. The parent whose SSN has not been provided or application for an SSN has not been made.
8. The parent who is an alien whose needs are met by the individual sponsor.
9. The parent who is an alien who has been in the U. S. less than three years and is sponsored by an agency/organization, unless it can be documented that the agency/organization no longer exists or the agency/organization provides a statement that they are financially unable to support the alien.*
10. The parent who is found to have committed an IPV and disqualified according to Section 102.3.
11. The parent whose citizenship or alien status has not been declared in writing according to Section 201.7.C.
12. The parent who is a convicted offender, serving a court-imposed sentence of unpaid public work, or unpaid community service during work hours, while still living in the home. (Exception: The convicted offender could be included only as an EWB if providing an essential service. See Section 302.5.)
13. The parent whose needs are met by her spouse, the stepparent of the eligible children, living in the home.
14. The minor parent not in compliance with the compulsory school attendance requirement in Section 201.3.
15. The parent convicted in state or federal court of fraudulently misrepresenting his address to receive TANF, Medicaid, or Food Stamps in two or more states and it is within ten years of the date the individual was convicted.**
16. The parent convicted in state or federal court of a felony offense for possession, use, or distribution of a controlled substance for conduct occurring after 8/22/96.**
17. The parent that failed to report to the local agency by the end of the fifth day after it became clear that the minor child would be absent from the home for 45 consecutive days.**
18. The parent that is fleeing to avoid prosecution or confinement or that is in violation of probation or parole.**

* 45 CFR 233.51

** Personal Responsibility and Work Opportunity Reconciliation Act of 1996

- E. The following caretaker/relative other than the parent, who requests assistance is not included when:
1. He is not in need.
 2. He is receiving SSI and/or an Auxiliary Grant.
 3. He is not (1) a U. S. citizen or (2) an eligible alien.*
 4. His needs are met by a spouse living in the home.
 5. He refuses to cooperate in identifying the parents, establishing paternity, or obtaining support by failing to comply with any of the requirements defined in 201.10. (See 502.7 A.2. regarding how to handle payment in this situation.) This exception applies until compliance with the requirements of cooperation of 201.10 is met.
 6. He is ineligible for a specified period of time based on receipt of a lump sum. (See 305.4.C.)
 7. The caretaker/relative's SSN has not been provided or application for an SSN has not been provided.
 8. He is an alien who has been in the U. S. less than three years and is sponsored by an agency/organization, unless it can be documented that the agency/organization no longer exists or the agency/organization provides a statement that they are financially unable to support the alien.**
 9. He is found to have committed an IPV and is disqualified according to Section 102.3.
 10. His citizenship or alien status has not been declared in writing according to Section 201.7 C.
 11. The caretaker/relative is convicted in state or federal court of fraudulently misrepresenting his address to receive TANF, Medicaid, or Food Stamps in two or more states and it is within ten years of the date the individual was convicted.*

* Personal Responsibility and Work Opportunity Reconciliation Act of 1996

** 45 CFR 233.51

12. The caretaker/relative is convicted in state or federal court of a felony offense for possession, use, or distribution of a controlled substance for conduct occurring after 8/22/96.*
13. The caretaker/relative failed to report to the local agency by the end of the fifth day after it became clear that the minor child would be absent from the home for 45 consecutive days.*
14. The caretaker/relative that is fleeing to avoid prosecution or confinement or that is in violation of probation or parole.*

Note: The spouse of the caretaker/relative cannot be included in the assistance unit as second caretaker.

F. The following individuals for whom assistance is requested on the basis of providing services essential to the child's well-being (EWB) are not included when:

1. He is not providing a service identified in Section 302.5.
2. He is not in need.
3. He is receiving SSI and/or an Auxiliary Grant.
4. He is not (1) a U. S. citizen or (2) an eligible alien.*
5. The EWB's SSN has not been provided or application has not been made for such SSN.**
6. He is ineligible for a specified period of time based on receipt of a lump sum. (See 305.4 C)
7. He is an alien who has been in the U. S. less than three years and is sponsored by an agency/organization, unless it can be documented that the agency/organization no longer exists or the agency/organization provides a statement that they are financially unable to support the alien.***
8. He is eligible for assistance in a federal category.
9. He is found to have committed an IPV and is disqualified according to Section 102.3.
10. His citizenship or alien status has not been declared in writing according to Section 201.7.C.

* Personal Responsibility and Work Opportunity Reconciliation Act of 1996

** 45 CFR 205.52

*** 45 CFR 233.51

When the household consists of a caretaker, his/her child(ren), and a child who is biologically related to the caretaker but has been adopted by some-one other than the caretaker, there will be two separate assistance units. In order for the caretaker to receive assistance for the child who has been adopted, the child's adoptive parents cannot be in the home.

The requirement in 302.6 that all siblings of a child for whom assistance is requested must be included in the assistance unit applies to the multiple group households also.

EXAMPLE

A grandmother has two grandchildren who are siblings and a niece living with her. She states she needs assistance for one of the grandchildren; however, application must be made for both grandchildren and each evaluated for inclusion in the unit. If she requests assistance for the niece, the niece will be included in the same unit also, provided she meets the eligibility requirements. However, the niece is not required to be in the unit, unless assistance is requested for her.

302.8 DEFINITION OF THE STANDARD FILING UNIT - For purposes of ADAPT, the group of individuals whose income must be considered in determining the assistance unit's eligibility and grant amount is referred to as the standard filing unit. This includes children and parents required to be in the assistance unit; essential persons; individuals whose income is subject to deeming; and, when assistance is requested, a caretaker-relative other than the parent.

303 - RESOURCES AFFECTING ELIGIBILITY - Repealed effective December 1, 2003.

304.2 TOTAL ALLOWABLE INDIVIDUAL NEED - When it is necessary to determine whether one individual included in the TANF assistance unit is in need, the total amount allowed for his needs must be identified. This amount is his pro rata share of the appropriate standard of assistance for the assistance unit. The same procedure is used to determine whether or not a caretaker-relative other than the parent or an essential (EWB) person living in the home is in need and eligible for inclusion in the assistance unit. Once the caretaker-relative other than the parent is included in the assistance unit, he may volunteer to participate in VIEW and continue to be eligible for TANF if countable income is less than the current poverty level for one person.

When an individual is removed from the assistance unit, the assistance plan is recomputed on the basis of the standard of assistance specified for the number of persons remaining in the unit.

304.3 MEDICAL EXAMS FOR TANF RECIPIENTS - Medical exams necessary to determine exemption status for VIEW or assess a VIEW participant's abilities, that are not covered by Medicaid, are paid from VIEW funds.

The worker and client must discuss which doctor should complete the medical evaluation. The final decision should be made by the recipient. The agency will pay for only one medical exam.

304.4 - TANF MATCH PAYMENTS (TMP) - The 2002 Virginia Acts of Assembly mandates, effective July 1, 2003, that all recipients of TANF cash assistance, including recipients whose deficit is less than \$10, be paid a monthly TANF supplement in an amount equal to the current child support collected by the Division of Child Support Enforcement, less the disregard of the first \$50 of current child support received by the assistance unit.

Match payments are defined as current child support paid on behalf of a case, less \$50. The Match payments are issued in the second month following receipt and are issued with the TANF benefits as a single payment. Payments will be issued even though the combined total of the TANF deficit and TMP total less than \$10.

The TMP is added to the TANF cash benefit after all eligibility and benefit transactions have been completed in ADAPT, i.e., imposition of disregards, penalties, and recoupment have been calculated. Since the match payments are a portion of the unit's monthly assistance payment, policies governing assistance payments must be applied, i.e., notices and fair hearings, **with the exception of continuation of benefits.**

TANF Match Payments will be issued during months of suspension and during VIEW sanctioned months. The issuance of TMPs to a recipient receiving continued benefits during the appeal process is contingent upon collection of current child support by DCSE two months prior to the payment month.

Since TMP payments are paid two months after collection of support, the case may receive payments for up to two months after case closure. These payments are automatically generated in ADAPT and mailed from the State Department of Social Services.

If the TANF benefit, including the TMP, exceeds the maximum reimbursable payment for the assistance unit, the maximum will not apply and the full amount of the combined payment will be issued.

Information on TMPs is passed to ADAPT each month, based on the amount of current child support paid two months prior to the payment month on behalf of assistance unit members. If current support paid in a month is \$50 or less, no match payment will be included in the TANF check. A TMP change notice will be sent by the State Department of Social Services to affected TANF cases each month, indicating the Match Payment amount to be paid on the first of the following month.

2. Time standards for reporting and acting on changes.

- a. All required changes must be reported timely, within 10 calendar days from the date the change becomes known to the assistance unit **but is reported timely if reported by the tenth day of the month after the change occurs.**

If the recipient is uncertain of the exact date or amount of the change, then the 10 day reporting period begins the day the change occurs. The recipient is not required to have full knowledge of the change when reporting it to meet the 10-day requirement for timely reporting. For new employment, the 10-day period may begin as late as the first day of employment. Once the recipient reports a change, the EW must evaluate the information within 10 days for potential impact and request additional information and necessary verifications that address rate of pay, number of hours, and how often paid.

1. When a change will increase benefits, the verification required must be obtained prior to the second month following the change in order to reflect the change in that month. If the assistance unit does not provide verification, the assistance unit's benefits will revert to the original amount unless a refusal to cooperate is documented, in which case an advance notice must be sent to terminate the case. An advance notice is not required if benefits are reverted to the original level because verification was not received, and the assistance unit was so advised at the time of increase.
 2. Whenever a change will decrease benefits, verification must be obtained prior to or at renewal.
 3. When a change neither increases nor decreases benefits, required verifications must be obtained prior to or at renewal.
- b. The worker is responsible for notifying the applicant/recipient when income must be verified. Income verification must be provided within 10 days of notification.
- c. The worker must advise the applicant/recipient on the appropriate notice of the amount of gross income anticipated to be received, the net income counted in determining the payment, the payment month the net income will begin to be counted, and the changes that must be reported.

3. Changes that must be reported.

that no part of an SSI or Auxiliary Grant payment or any income of a recipient of either program can be counted in determining the amount of an TANF payment, even though the applicant/recipient is the spouse of the needy caretaker or the parent of the eligible children.* When living together, the income of a minor caretaker's parent(s) will be deemed available to the minor caretaker's assistance unit until the minor care-taker reaches the age of 18, regardless as to whether the minor caretaker is excluded from the assistance unit, due to SSI receipt, or for any other reason.**

- B. Benefits such as, but not limited to, RR Retirement, private corporation retirement, unemployment compensation benefits, Veterans or Social Security benefits, including reduced benefits, to which a member of the assistance unit is clearly entitled are available and must be counted even though the individual chooses not to accept such benefits (Section 305.4 B.1). However, individuals eligible for assistance under either the SSI or TANF program have the right to elect the program in which they wish to participate. Individuals applying for or receiving assistance through TANF cannot be mandated to apply for SSI. The applicant/recipient should be advised of this option.***
- C. The gross amount of income or benefits must be counted even though all or a portion of the payment has been withheld by court order, i.e., a garnishment or court-ordered child support. Benefits from which child support can be withheld include, but are not limited to, Social Security benefits, Veterans' benefits, Unemployment benefits, and Workers' Compensation benefits. Supplemental Security Income (SSI) and public assistance benefits are exempt from garnishment under federal and state law.

The agency has a responsibility to explore potential **income sources** and assist the applicant/recipient in developing them to a state of availability whenever possible.****

It is the responsibility of the recipient to report **required changes** to the agency within 10 calendar days from the date the change becomes known to the assistance unit. Changes required to be reported by the applicant, which occur after the face-to-face interview but before the date of the Notice of Action to approve the case, must be reported by the assistance unit within 10 days of the date of the notice.

There are some differences in the provisions for counting earned and unearned income. Therefore, when income is from property, the eligibility case record must clearly indicate the basis for determining whether it is earned or unearned income, that is, whether the individual produces it by his own efforts or is actively engaged in management. For example, income from room and board is considered earned income only when the individual is engaged in a commercial enterprise for profit. Regardless of whether the income is earned or unearned, it is the profit which is considered the gross income.

* Social Security Act, Section 402(a)(24)

** 45 CFR 233.20(a)(3)(xviii)

*** Social Security Act, Section 402(a)(24)

**** 45 CFR 233.20(a)(3)(ix)

305.4 OTHER INCOME - In determining the amount of assistance, all other regular income received or anticipated to be received by members of the assistance unit or used in determining eligibility must be counted in the month in which it is received, except that specifically disregarded under A.

- A. Other Income Disregards - The following income of members of the assistance unit, a parent not included in the assistance unit or anyone whose income is used in determining eligibility or the amount of assistance must be disregarded.

Income which is disregarded under the following provisions must not be counted in determining the need for assistance of any individual under any other federal assistance program:*

1. Home produce of the assistance unit utilized for their own consumption.
2. The value of food coupons under the Food Stamp Program.
3. The value of foods donated under the U.S.D.A. Commodity Distribution Program, including those furnished through school meal programs.
4. Any payment received under Title II of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970.
5. Any benefits received under Title VII, Nutrition Program for the Elderly, of the Older Americans Act of 1965, as amended.
6. **Money received for educational purposes.****
7. Training allowances (transportation, books, required training expenses and motivational allowances) provided by Vocational Rehabilitation for persons participating in Vocational Rehabilitation Programs.***

The disregard is not applicable to the allowances provided by VR to the family of the participating individual.

* 45 CFR 233.20 (a)(4)(iii)

** 45 CFR 233.20 (a)(3)(iv) (B) and (vii),
and (a)(4)(ii)(d), and Public Law 102-325

*** 45 CFR 233.20 (a) (4) (vii)

8. Any portion of an SSI payment and/or Auxiliary Grant.*
9. Payments to VISTA Volunteers under Title I, when the monetary value of such payments is less than minimum wage as determined by the Director of the action office,** and payments for services of reimbursement for out-of-pocket expenses made to individual volunteers serving as foster grandparents, senior health aides, or senior companions, and to persons serving in the Service Corps of Retired Executives (SCORE) and Active Corps of Executives (ACE) and other programs pursuant to Titles II and III, of Public Law 93-113, the Domestic Volunteer Service Act of 1973, including Americorps VISTA.*** The worker must contact the Action Office at the following address or telephone number when VISTA payments are reported; Action Office, 400 N. 8th Street, Richmond, Virginia 23219, (804) 771-2197.

Note: This disregard does not apply to payments to participants in Americorps USA and Americorps NCCC. These programs are under the authority of the National and Community Service Trust Act of 1993 which contains no requirement to disregard payments to participants applying for or receiving TANF.
10. The Veterans Administration educational amount for the caretaker 18 or older is to be disregarded when it is used specifically for educational purposes. Any additional money included in the benefit amount for dependents is to be counted as income to the assistance unit.
11. Foster care payments received by anyone in the assistance unit.
12. Any unearned income received from Title IV, Part B (Job Corps) of the Job Training Partnership Act (JTPA) by an eligible child is to be disregarded as an incentive payment. However, any payment received by any other Job Corps participant or any payment made on behalf of the participant's eligible child(ren) is to be counted as income to the assistance unit.
13. Income tax refunds (including Earned Income Tax Credit payments and refunds). These exempt tax credits include federal earned income tax credits and state earned income tax credits.
14. Any payment made under the Fuel Assistance Program.
15. The value of supplemental food assistance received under the Child Nutrition Act of 1966. This includes all school meal programs; the Women, Infants, and Children (WIC) Program; the child care food program; and U.S.D.A. reimbursement payments to day care providers which are authorized by the National School Lunch Act.
16. All federal, state, or local government rent and housing subsidies and utility payments.****

* 45 CFR 233.20(a)(3)(x)	*** 45 CFR 233.20(a)(4)(ii)(g)
** 45 CFR 233.20(a)(4)(ii)(h)	**** 45 CFR 233.20(a)(3)(xii)

17. Any unearned income received by an eligible child under Title II, Parts A and B, and Title IV, Part A of the Job Training Partnership Act (JTPA) is to be disregarded.
18. Any funds distributed to, or held in trust for, members of any Indian tribe under Public Law 92-254, 93-134, 94-540, 98-64, 98-123, 98-124 or 97-458. Additionally, interest and investment income accrued on such funds while held in trust, and purchases made with such interest and investment income are disregarded.*
19. The following distributions received from a Native Corporation under the Alaska Native Claims Settlement Act (Public Law 100-241):
 - a. Cash (including cash dividends on stock received from a Native Corporation) to the extent that the total received does not exceed \$2,000 per individual per calendar year;
 - b. Stock (including stock issued or distributed by a Native Corporation as a dividend or distribution on stock);
 - c. A partnership interest;
 - d. Land or an interest in land (including land or an interest in land received from a Native Corporation as a dividend or distribution on stock); and
 - e. An interest in a settlement trust.

* 45 CFR 233.20(a)(4)(ii)(e)

20. Income derived from certain submarginal land of the United States which is held in trust for certain Indian tribes (Public Law 94-114).
21. In determining eligibility for assistance, the first \$50 of total child or child and spousal support payments received by the assistance unit is to be disregarded. In calculating the initial month's payment(s) the \$50 disregard is only to be applied if it is anticipated that \$50 will not be collected by DCSE subsequent to case approval (the date that the approval action is keyed into ADAPT). If it is anticipated that at least \$50 will be collected, the support disregard is not to be applied when calculating the initial payment since the unit will receive a disregard payment from DCSE.* If the amount that is anticipated to be collected by DCSE after case approval is less than \$50, disregard an amount from the support received prior to case approval that will ensure the total support disregard for the month does not exceed \$50. For ongoing cases, DCSE will send each assistance unit a disregard payment of the first \$50 of child support received each month (see item 24 below). The \$50 disregard is only applicable to current child/spousal support payments received each month.
22. Payments sent to the recipient by the State which are identified as disregarded support.*
23. Federal major disaster and emergency assistance provided under the Disaster Relief and Emergency Assistance Amendments of 1988 and disaster assistance provided by state and local governments and disaster assistance organizations (Public Law 100-707).
24. Payments received by individuals of Japanese ancestry under the Civil Liberties Act of 1988, and by Aleuts under the Aleutian and Pribilof Islands Restitution Act (Public Law 100-383).
25. Payments by VIEW for support services such as transportation, uniforms, child care, etc.**
26. Any payment received from the Agent Orange Settlement Fund or any other fund established in response to the Agent Orange product liability litigation.*** To verify whether a payment is an Agent Orange payment, use documents in the individual's possession. If the individual cannot provide verification or the situation is unclear, write to the Agent Orange Veteran Payment Program, P.O. Box 110, Hartford, CT 06104, Attention: Agent Orange Verification. Include in the request the veteran's name and social security number. If a survivor of a qualifying veteran was paid, also provide the survivor's name and social security number.
27. Payment received by individuals under the Radiation Exposure Compensation Act (Public Law 101-426).

* 45 CFR 233.20(a)(4)(ii)(j)

** 45 CFR 233.20(a)(11)(v)(c)

*** Public Law 101-239

28. Funds received pursuant to the Maine Indians Claims Settlement Act of 1980 (Public Law 96-420); and the Aroostook Band of Micmacs Settlement Act (Public Law 102-171).
29. Funds paid to an escrow account established under the Family Self-Sufficiency Program of the Department of Housing and Urban Development.
30. Student financial assistance received under Bureau of Indian Affairs student assistance programs.*
31. Interest earned or appreciation in value on a savings or investment account for the purpose of self-sufficiency.
32. Up to \$2,000 per year of income received by individual Indians, which are derived from leases or other uses of individually-owned trust or restricted lands.**

* Public Law 102-325

** Public Law 93-134

33. All bona fide loans, regardless of the intended use.* This includes loans obtained for any purpose, and may be from a private individual as well as from a commercial institution. A simple statement signed by both parties indicating that the payment is a loan and must be repaid is sufficient to verify that a loan is bona fide. If the customer indicates that money received was a loan but does not provide required verification, the money is to be treated as unearned income in the month received.

Interest earned on the proceeds of a loan while held in a savings account, checking account, or other financial instrument will be counted as unearned income in the month received.

34. Income, including support, received by or on behalf of a child ineligible for TANF due to the family cap provision. **
35. Payments received by victims of Nazi persecution under Public Law 103-286.
36. Matching contributions deposited in an individual development account (IDA) or on the applicant/recipient's behalf in a parallel account maintained by the organization administering the IDA program. (Refer to Sections 303.2 I and J regarding IDA's.)
37. Income received by children who are in a VIEW period of ineligibility.
38. Interest income of less than an average of \$10 per month.
39. TANF Match Payments issued to TANF recipients based on current support collected by the Division of Child Support Enforcement.
40. Any veteran benefits received by children born with spinal bifida, who are natural children of individuals who served in Vietnam during the period beginning January 9, 1962, and ending on May 7, 1975.
41. Payments received from the Ricky Ray Hemophilia Relief Fund established under Public Law 105-369.
42. Allowances, earnings, and payments to individuals participating in programs under Title I of the Workforce Investment Act (WIA).***

B. Income From Social Security and Other Benefits - Monthly benefits received or anticipated to be received by members of the assistance unit, or individuals required to be in the assistance unit, must be counted as income, with the following exceptions:

1. When a member of the assistance unit is eligible for benefits (such as but not limited to, RR Retirement, private corporation retirement,

* 45 CFR 233.20(a)(3)(xxi)

** Code of Virginia, Section 63.2-604

*** 20 CFR 667.272 (c)

Veterans, Social Security, or any reduced benefits), the verified amount must be counted, even though the individual chooses not to accept such benefits.

The agency has a responsibility to explore potential resources and assist the applicant/recipient in developing them to a state of availability whenever possible.*

2. When educational benefits are being received from Veterans Administration. (See 305.4.A.12.)
3. When the Medicare Part B premium is deducted from the Social Security or Railroad Retirement benefits of an individual who is also receiving Medicaid. The amount of benefits actually received, plus the amount of the Part B premium, is counted as income since Medicaid will pay the premium during the time the individual receives Medicaid.

- C. Lump Sum Payments - The receipt of a nonrecurring lump sum payment, such as the accumulation of benefits for a prior period, including Social Security and Workmen's Compensation benefits; payments in the nature of a windfall, e.g., inheritances or lottery winnings; personal injury awards; that portion of a casualty property loss payment which is not used for repair or replacement of the damaged/lost **property**; life insurance settlement when the policy is owned by someone other than a member of the assistance unit; or income from any other nonrecurring source, shall be prorated and reflected as income when the lump sum plus all other net countable income exceeds the standard of need (100%) in the month of receipt.** NOTE: A lump sum is required to be treated as such even if the customer places the funds in a savings account as specified in 303.2 H.

In situations involving casualty property loss payments for repair or replacement of damaged/lost **property**, such payments will not be considered as income if the client initiates action to repair or replace the **property** prior to or within 30 calendar days after receipt of the lump sum payment and expends the payment for such repair or replacement within 12 months after receipt. NOTE: Verification of initiation of action to repair or replace the **property**, expending the payment within 12 months, and use of the payment must be documented in the case record. The casualty property loss payment must be kept separate from other income. If not kept separate, the lump sum policy will apply.

If the recipient does not initiate action to repair or replace the **property** within 30 calendar days after receipt, without good cause, a period of ineligibility will be calculated beginning with the first full month following the 30 calendar day period if administratively possible, but no later than the next month. If the recipient does not expend the payment to repair or replace the **property** within 12 months after receipt, without good cause, a period of ineligibility will be calculated beginning with the first month following the 12 month period if administratively possible, but no later than the next month. NOTE: When it is not possible to close the case until the next month due to the advance notice period, this payment will not be an overpayment.

* 45 CFR 233.20(a)(3)(ix)

** 45 CFR 233.20(a)(3)(ii)(F)

Good cause is defined as those situations in which, through no fault of his/her own, the recipient fails to initiate action within 30 calendar days or to expend the payment within 12 months to repair or replace the **property**, e.g., hospitalization, failure of the contractor to complete the work, etc.

If good cause is determined by the agency to exist for not complying with either the 30-calendar-days or 12-month period, the casualty property loss payment will continue to be disregarded as lump sum income. The agency must establish that good cause continues to exist at each full redetermination thereafter. If it is determined at redetermination that good cause no longer exists, the period of ineligibility will begin the month following the month of redetermination if administratively possible, but no later than the next month. NOTE: When it is not possible to close the case until the next month due to the advance notice period, this payment will not be an overpayment.

Lump sum payments received by any member of the assistance unit, or an individual required to be in the assistance unit, must be used to determine continued eligibility or ineligibility of the unit. A caretaker-relative or EWB, other than the parent or stepparent, is not eligible for inclusion in the assistance unit if he receives a lump sum which when added to other income of the assistance unit would cause ineligibility based on the standard of assistance. The caretaker-relative or EWB, other than the parent or stepparent, shall have a period of ineligibility established for that individual by using the lump sum plus that individual's net countable income divided by the standard of need for an assistance unit of one.

The following procedures are applicable in the treatment of lump sums:

1. Determining amount of lump sum to be considered - Only the amount received by an individual which is available for maintenance (lump sum, less directly related expenses paid) shall be considered as income.

Example 1: Ms. S. notifies the local agency that her claim from an automobile accident has been settled. The settlement was for \$2,000. She received from her attorney, a check in the amount of \$1,000. The check stub states \$1,000 was deducted to cover legal and medical expenses. The \$1,000 that she actually received shall be considered as income.

A lump sum received by the parent(s) of a minor caretaker or a stepparent who is not included in the assistance unit will be considered income available to the assistance unit in the month of receipt only (see 305.4.F.). Subsequent to the month of receipt, the remainder of the lump sum will not be considered in determining eligibility for the assistance unit.*

A lump sum received by a stepparent included in the assistance unit will be considered in accordance with 305.4.C.

3. The period of ineligibility - Once established, the period of ineligibility may not be shortened due to changes in the client's situation except in situations cited below.** All members of the assistance unit, including the excluded individual required to be included in the assistance unit when the lump sum payment was received, will be ineligible for the duration of the period of ineligibility.

Exception: When any one or more of the following situations has occurred, the period of ineligibility must be recalculated. If the recalculated ineligibility period is shorter than the one previously established, the period of ineligibility must be adjusted.

- a. The standard of need has been increased since the period of ineligibility was established. The increase may be the result of a statewide increase in the standards of need or an addition to the assistance unit of an otherwise eligible required unit member, e.g., a newborn, a child returning home, or an individual who was sanctioned at the time the period of ineligibility was established whose sanction has now ceased. (Moving from one locality grouping to another does not meet this condition.);
- b. The assistance unit incurs medical expenses subsequent to receipt of the lump sum, and the lump sum monies are used to pay these expenses;
- c. The lump sum, or a portion thereof, becomes unavailable due to one of the following circumstances:
 - 1) a member of the assistance unit, or a relative of specified degree living with the assistance unit, absconds with the lump sum monies,
 - 2) the lump sum monies are stolen and the theft is reported to police,

* 45 CFR 233.20(a)(3)(xiv)

** 45 CFR 233.20(a)(3)(ii)(F)

4. Applications/reapplications when a lump sum has been received - The eligibility worker must evaluate prior receipt of a lump sum when making an eligibility determination of any application. The following rules are applicable when evaluating a lump sum prior to a decision of eligibility.
 - a. Any person whose needs were considered in establishing a period of ineligibility will not be eligible for assistance until the period of ineligibility has ended. Persons not considered in establishing the period of ineligibility who are required assistance unit members and otherwise eligible must be added to the unit for purposes of recalculating the period of ineligibility in accordance with Section 305.4.C.3.a. The required unit member cannot receive TANF assistance as a separate case.
 - b. In situations where the recipient did not provide verification of payment or directly related expenses and the full amount of the lump sum was used to establish a period of ineligibility, subsequent provision of verification of payment will not change the established period of ineligibility.
 - c. A lump sum received prior to the month of application shall **not** be evaluated.
 - d. A lump sum received during the month of application or at any time during pending status of the application shall be treated as income in the month received and, if appropriate, a period of ineligibility shall be established using the procedure in 2.b.1) above. In this situation the period of ineligibility shall begin with the month of receipt of the lump sum.
 - e. Cases which are closed for failure to secure verification of lump sum payments must provide verification of the payments prior to any future receipt of assistance. The period of ineligibility, even though established at a later time, shall begin with the month of receipt of the lump sum.
 - f. Cases which are closed for reasons other than a lump sum, and the lump sum was reported prior to the effective date of case closure, the period of ineligibility will begin in the month following the month in which the lump sum was received. (Refer to 305.4.C.2.) If, however, the lump sum was not reported prior to the effective date of case closure, the period of ineligibility shall be established prior to any future receipt of assistance. The period of ineligibility, in this instance, shall begin with the month of receipt of the lump sum.
- D. Sponsored Aliens - For the purposes of determining eligibility, the income of any person who sponsors an alien's entry into the United States on or after December 19, 1997, shall be considered to be the unearned income of the alien.

Policies applicable when the affidavit of support was executed on or after December 19, 1997, are as follows:

- a. Countable Income of Sponsors - For purposes of determining eligibility, the income of any person who executed an affidavit of support with respect to the alien and the spouse of any person who executed an affidavit on behalf of the alien, shall be considered to be the unearned income of the alien.
- b. Termination of the Sponsor's Obligation - The evaluation and use of the income of the sponsor and spouse of the sponsor must continue toward the TANF eligibility and benefit level of the immigrant until the alien:
 - 1) becomes a U.S. citizen through naturalization; or
 - 2) has worked, or can be credited with, 40 qualifying quarters of work, provided that the sponsored alien is not credited with any quarter beginning on or after January 1, 1997, during which the sponsored alien receives federal public benefits. (Refer to Appendix 4 to Section 305.); or
 - 3) leaves the U.S. or no longer holds permanent resident status; or
 - 4) dies or the sponsor dies.
- c. Review of Income of Alien Upon Reapplication - Whenever an alien reapplies for TANF benefits, the worker must review the income attributed to the alien.
- d. Indigence Exception - If a determination is made by the local agency that a sponsored alien would, in the absence of the assistance provided by the agency, be unable to obtain food and shelter, taking into account the alien's own income, any cash, food, housing, or other assistance provided by other individuals, including the sponsor, the amount of income of the sponsor or the sponsor's spouse which shall be attributed to the sponsored alien shall not exceed the amount actually provided for a period beginning on the date of such determination and ending 12 months after such date.

The local agency must notify the Office of the U.S. Attorney General of each such determination, including the names of the sponsor and the sponsored alien involved. The written notification

existing court order for support, or a Virginia birth certificate with the father's name exists in the case record, support received from such person, if absent, must be redirected to the State.

4. Other nonresponsible persons - Cash contributions from non-responsible persons, such as cohabitants, are counted as income in the amount received or anticipated in establishing initial and continuing eligibility.

A cohabitant is a person cohabiting (as man and wife) with the parent of the TANF children.

- F. Deeming Income - In certain situations, the income of an individual living in the home with the assistance unit must be evaluated to determine what amount, if any, must be considered available to the assistance unit, or deemed, regardless of whether the income is actually made available to the unit. Income deeming is applicable to the following persons:

- a stepparent living with the assistance unit who is not included in the assistance unit. Income of a stepparent will be deemed available to the child(ren) **providing** the natural or adoptive parent of the child(ren) is also living in the home. Divorce terminates the stepparent's financial responsibility, but not the degree of relationship.
- the parent(s) of a minor parent, when the minor parent and parent(s) of the minor parent are living together;
- an alien parent who is ineligible for assistance due to his alien status.

The procedures described below are to be used to determine the amount of income that must be deemed available to the assistance unit.

1. Stepparent Deeming Procedures - The Code of Virginia has been modified in regard to the stepparent deeming procedure with the goal of keeping families together.* The two-step procedure in a. below must be followed to determine eligibility and the grant amount when there is a stepparent in the home but not in the assistance unit and the parent is otherwise eligible for inclusion in the assistance unit. If the parent has been excluded from the assistance unit due to any reason other than failure/refusal to cooperate with DCSE, only Step 2 is necessary. If the parent has been excluded due to failure/refusal to cooperate with DCSE, the procedure in b. below is applicable.

- a. Step 1 - Determining Eligibility of the Parent in the Home -

Compute the amount of the stepparent's income available to the assistance unit by subtracting the following from the verified anticipated gross monthly earned income (use net profit if from self-employment) and gross unearned income:

- 1) The first \$90 of gross earned income;
- 2) The standard of need at 100% for household members claimed or who could be claimed as dependents on the stepparent's federal income tax return, excluding members of the assistance unit.

* Code of Virginia, Section 63.2-6

of dependents the stepparent has. Countable income is to be deducted from the standard of assistance at 90% for the assistance unit.

- b. Stepparent Deeming Procedure Used When the Parent in the Home Refuses/Fails to Cooperate With DCSE - When it is determined that the parent of the TANF child(ren) has failed or refused to cooperate with DCSE, the stepparent's income must be deemed available to the assistance unit, calculating the deemed amount in accordance with 305.4.F.1.a.1) - 4). The deemed income, in addition to the income of the parent and child(ren) must be counted to determine the assistance unit's eligibility and grant amount.

Failure of the customer to verify the income of the stepparent will result in ineligibility of the case.

- c. Stepparent Deeming When the Parent Is Not in the Home With the Stepparent - **Deeming stepparent income is not appropriate when the parent of the TANF child(ren) is not living in the home, regardless of whether absence from the home is due to separation, divorce, or death. The stepparent and the natural/adoptive parent will be considered living together, regardless of absence due to military duty, employment, or other absences or convenience, as long as they consider themselves to be living as husband and wife.**

If the stepparent is included in a TANF assistance unit, policies and procedures applicable to assistance unit members apply instead of the deeming procedures.

Note: A lump sum payment received by an eligible child's stepparent is considered available to the assistance unit in the month of receipt only.

EXAMPLE #1:

Ms. P. is applying for TANF for herself and her 3 children. Ms. P. receives unearned income in the amount of \$50 per month, and each of the 3 children receives unearned income in the amount of \$50 per month, as well. Ms. P.'s husband (not the children's father) is employed and earns \$1,530 per month. Mr. P. has no other dependents.

1. To determine Ms. P.'s eligibility to be included in the AU:

Mr. P.'s income	\$1,530.00
Less \$90 disregard	<u>- 90.00</u>
	\$1,440.00
Less standard of need for 1 (group II)	<u>-174.00</u>
Amount deemed available to Ms. P.	\$1,266.00
Standard of assistance for 4 person AU	\$ 382.00
Note: The standard of assistance does not include the TANF Match Payment.	

Since the portion of Mr. P.'s income which is deemed available to Ms. P. exceeds the standard of assistance for 4 persons, she is not eligible to be included in the AU.

3. Home Energy Assistance - Payments made directly to a household for home heating or cooling provided by suppliers of home energy, such as electric and gas companies and fuel oil dealers, must be counted as income.* When payments are received jointly by a household composed of TANF and non-TANF individuals, including SSI recipients, the TANF assistance unit's pro rata share, based on the total number of persons in the household, must be considered as income to the TANF unit.

The pro rata share of non-TANF and SSI individuals is not to be counted.** Note: Payments made through the Virginia Energy Assistance Program administered by local departments of social services are not considered home energy assistance and are disregarded per Section 305.4.A.16.

4. Public Assistance Benefits Received From Another State - It is possible for individuals who move from another state to Virginia to receive assistance from both states in the same month. However, the assistance paid by the state of prior residence must be considered in determining eligibility and benefit amount in Virginia. The amount of assistance received by the assistance unit from the former state is to be treated as unearned income in the month received.

Example 1: An applicant applies in Virginia on August 30 and receives a grant from Pennsylvania for \$100 in September which covers the period of the last week of August and the first week of September. If the assistance unit is eligible for assistance in September and the S0A is \$320, the \$100 of unearned income is subtracted from \$320, for a grant of \$220.

Example 2: A Group II locality receives an application on September 2 requesting assistance for a parent and two children. The family received a TANF grant from another state on September 1 for \$100 covering the period September 1-15, and the case is terminated in the former state effective September 15. The agency determines eligibility on September 10 (date of authorization). The first payment is calculated as follows:

\$320 - \$100	= \$220	- monthly deficit
\$220/30	= \$7.33	- daily rate
\$7.33 x 21 days	= \$153.93	- prorated deficit
\$153 grant		(rounded down)

5. Royalties are considered unearned income.
6. Interest earned on cash assets in excess of \$10 a month, such as a bank account or certificate of deposit, is considered unearned income in the month received (available) unless anticipated to be received less often i.e., quarterly, annually, etc, in which case it may be prorated over the period earned if requested by the applicant/recipient. Policy in Section 305.1. B.2 is applicable in determining if the income is "reasonably certain" to be received and, if so, the methods available to use to calculate the anticipated amount. Exception: Interest accrued on exempted VIDA or AFIA funds is not countable income.

* 45 CFR 233.20(a)(3)(xiv)

** 45 CFR 233.53(c)(2)

- H. Benefits and Services Received in Lieu of Income - When an applicant or recipient appears to be working but is not paid directly, the worker must determine whether there is an identifiable amount that must be considered as income. Such arrangements must be evaluated using the following guidance:

If the client performs services but receives no pay directly, and there is an identifiable amount of income that could be paid directly to the client, count the identifiable amount as income.

If the client performs services but is not paid directly, and there is no identifiable amount of income that could be paid to the client, no income is counted.

Examples:

1. Situation #1: An applicant/recipient works for an employer and, in lieu of wages paid directly to the applicant/recipient, the employer pays an expense on behalf of the applicant/recipient. In this situation, there is an identifiable wage and even though it is not paid to the client it must be counted as earned income.
2. Situation #2: The applicant/recipient barter for services. There is an exchange of services for which no income should be counted. For example, an applicant or recipient receives shelter at no cost in exchange for babysitting and housekeeping services.

305.5 INCOME OF EXCLUDED CHILDREN REQUIRED TO BE IN THE ASSISTANCE UNIT - When a child is excluded from the assistance unit due to lack of verification of categorical requirements for the child (See 201.1.A.), or when such child fails or refuses to meet conditions of eligibility (See 201.1.B), that child's needs will not be included in the assistance unit. The earned and unearned income of that child, however, will be considered available to the assistance unit. The earned income disregards are applicable per Section 305.3.B. If the child's income cannot be verified, eligibility for the assistance unit cannot be established. (Refer to Section 305.1.E.3.)

If the child has been determined categorically ineligible to be in the assistance unit, no part of his income will be considered available to the assistance unit, unless it is actually made available to the unit. (See 201.12.A and D for treatment of income of the child subject to the family cap provision.)

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401.1 BASIC REQUIREMENTS REGARDING APPLICATION -

- A. Request for Assistance - Federal regulations* require that any individual wishing to do so shall have the opportunity to apply for whatever type of federal assistance he chooses. This means that no individual can be denied the right to make application for public assistance, even though they may be potentially eligible in another federal program, e.g., SSI. The worker should assist the individual in selecting the appropriate categories of assistance. It is mandatory that the opportunity to apply be freely available and that no obstacles to application be imposed. An inquiry** which is simply a request for information about eligibility requirements, is to be distinguished from an application. No case folder is to be prepared for an inquiry and no case number assigned. An Inquiry Book, or comparable record, must be kept in each local office for recording the date and notice of each inquiry and the name of the person seeking information.

A request for TANF must include, if living in the same household, the parent(s) and all minor siblings (both natural and adoptive) of the dependent child for whom assistance is requested. The eligibility worker will assist the applicant/recipient in determining who must be included in the request for assistance. If a child for whom assistance is requested is not eligible because categorical requirements are not met, he is a SSI recipient, he receives foster care maintenance payments, he is a child subject to the family cap provision, or he is in a period of ineligibility due to receipt of a lump sum in a former assistance unit, he will not be included in the assistance unit and his income will not be considered available to the assistance unit.

When a parent or sibling enters the household or circumstances change that may require a parent or sibling living in the home to be included in the assistance unit, his eligibility for inclusion in the assistance unit must be evaluated. The new individual will be considered to be included in the application as of the day he enters the household or, if already residing with the unit, the day the individual's circumstances change requiring him to be included in the unit. A newborn is considered to be included as of his date of birth. The family cap provision per 201.12 may apply to a child born on or after May 1, 1996. If the caretaker refuses to provide the information about an individual required to be included in the assistance unit, it may not be possible to determine the unit's eligibility or payment.

* 45 CFR 206.10(a)(1) and (2)

** 45 CFR 206.10(b)(2)

B. Substantiation of Eligibility Factors

1. Initial Eligibility

The applicant must be advised of the need to substantiate the eligibility factors (e.g., categorical requirements **and** income) and that he may have in his possession the necessary evidence to establish eligibility. The responsibility of the eligibility worker is to secure, evaluate, substantiate, and record the facts regarding each element of eligibility, including the date of substantiation and the method of securing the information. This information must be entered into the applicant's ADAPT case file to the extent possible. In addition, the worker must complete the Permanent Verification Log (032-03-823A) and either the Evaluation of Eligibility Form (032-03-823) or the ADAPT Verification Form (032-03-366) to record all other information obtained in evaluating eligibility and the benefit amount.

At the time of application, there should be a joint decision between the client and the worker as to how necessary verification will be secured and who will assume the responsibility for securing each.

If, after advising the applicant of the necessary information, the applicant is reluctant or unwilling to provide verifications and refuses to permit the worker to secure them, the worker must consider carefully with him his reasons and explain that without the required verification, eligibility cannot be established. Exception: If the client is unable or refuses to provide verification of categorical requirements for a child who is required to be included in the assistance unit or if the child does not meet the conditions of eligibility, that child will be excluded; however, it may be possible to determine eligibility for the remaining assistance unit members.

If the client decides to assume the responsibility for obtaining the required verification, he must be advised that the information must be provided to the agency within ten (10) days and that failure to do so may affect the decision of eligibility. If the client cannot obtain the necessary information, because of circumstances beyond his control, and requests the worker's assistance in securing such information, the agency worker must then assume the responsibility for obtaining the needed verification.

When the responsibility for obtaining verification has been assumed by the worker, the client must be advised that if the agency or person from whom verification has been requested does not respond to the request, eligibility cannot be established. In these situations, the Notice to Client of Action must be sent and the case record documented to reflect attempts made to obtain verification. Copies of all relative correspondence must also be in the case record.

If eligibility is established within the original 45-day processing time, the original application date is protected when an application is denied as a result of lack of required verification. The initial application date must be used if subsequent information substantiates the applicant's eligibility. (See 401.3.F.5.)

2. Ongoing Eligibility

- a. Interim Change Reports - When changes occur within the renewal period that affect eligibility or benefit amount, the agency must evaluate the change and take action to adjust the benefit amount, if necessary. The agency must make adjustments in entitlement and benefit amount based on reported changes and for changes the agency initiates.

The following changes must be reported by the assistance unit following case approval:

- 1) Changes in address (a new physical or mailing address); and
- 2) Changes in income that place the assistance unit's monthly income above 130 percent of the federal poverty level (FPL).
- 3) **That an eligible child has left the home.**

Assistance units must report the changes listed above within 10 calendar days from the date the unit knows of the change, **but the report is timely if** reported by the tenth of the following month. The 10-day period begins the day the change becomes known to the assistance unit. If the assistance unit is uncertain of the exact date or the exact amount of income that has changed, the 10-day reporting period begins the day the change occurs. The change may be reported on the Change Report form, by telephone, face-to-face contact, by mail, or electronically. The unit may also report a change of its circumstances with the filing of the Interim Report. Changes may be reported by an assistance unit member or any person having knowledge of the assistance unit's circumstances. When the report is made by mail, it may not reach the local agency within the 10-day period. The assistance unit will have met

the reporting requirement if the letter is postmarked within the 10-day period. Substantiation of eligibility factors or verification of any change requested by the worker must be provided by the recipient as soon as possible but no later than 10 days from the date the information is requested.

When a change in income is reported or becomes known to the eligibility worker, the agency must redetermine eligibility. If the recipient reports the change to any other person in the agency, the information must be shared with all other agency staff involved in the case.

While the assistance unit is required to report only the changes indicated above, the agency must act on all information received. Additional changes requiring review of a recipient's circumstances, may be initiated by:

- Information secured in the course of the periodic renewal of eligibility or reported on an Interim Report;
- Knowledge of an anticipated change; and,
- Information received from other sources, such as, but not limited to, systems matches.

Any change in circumstances reported by the client during the month should be documented in ADAPT and in the case record.

Action will be taken according to Section 305.1, page 11.

- b. Substantiation of Eligibility - The recipient must be advised of the need to substantiate eligibility factors whenever a change **is reported**. When changes that affect eligibility or payment amount occur after the case has been approved, the responsibility for the change lies both with the recipient and the local agency.

If required verification is not obtained or provided in time to prospectively determine eligibility for the next payment or to complete a redetermination by the due date, continuing eligibility cannot be determined and the case will be suspended for one month only. If verification is still not provided, the case will be closed for the month following the month of suspension. (See 401.3.G.4.)

If verification is provided after the action to suspend has been taken, the worker will reinstate assistance for the month of suspension, if appropriate. Or, if verification which establishes continued eligibility is provided after action to

close has been taken but before the effective date of closure, the worker will reinstate assistance effective with the month closure was to occur.

- c. Adding Persons Required To Be in the Assistance Unit - The assistance unit must report a new unit member when completing a renewal or Interim Report. If a new unit member enters the home between renewals or Interim Report filing, the report is considered timely provided the individual entered the home after the most recent renewal or Interim Report was completed. The change to add a person required to be in the assistance unit must be made by the agency within 45 days following the date the new member was reported.

- 1) Eligibility for Payments - Once the agency has secured verification of categorical requirements and conditions of eligibility have been met, the individual's needs **and** income are to be included in determining eligibility and the amount of future payments.

If verifications and conditions of eligibility are substantiated within the 45-day time frame for adding persons or the 45-day period has passed and the agency can document that the delay in providing categorical verifications/meeting eligibility conditions was due to good cause (beyond the assistance unit's control), payments beginning with the date the change was reported must be recalculated considering the individual's needs **and** income.

Regardless of whether the new individual's presence is reported timely, if the required categorical verifications are not provided or the conditions of eligibility are not met until after the 45-day time frame established for adding the individual, and the delay was not due to good cause (beyond the assistance unit's control), eligibility for retroactive payments is to be determined beginning with the date the last required verification was received by the agency or condition of eligibility was met. Any underpayments identified must be corrected.

The above procedures will require the proration of the first month's assistance in most instances. (Refer to Section 502.2.A.)

NOTE: Refer to 201.12 for the family cap provision which affects newborn children, some adopted children, and the child subject to the family cap provision who moves back into a parent's home.

- 2) Repayment of Overpayments - If the new individual was not reported timely, overpayments may exist. Follow procedures in Section 503.7.G. to calculate the amount overpaid.

Example: A parent enters the home on October 15 but is not reported to the agency until January 8 of the following year. The last renewal was completed in November, one month after the **parent** entered the home. All months beginning with the month after the **parent** entered the home must be evaluated for possible overpayments.

- d. Adding Other Persons - A request to add an individual not required to be in the unit, such as a caretaker-relative other than a parent or EWB, will be processed within the normal 45-day application processing time frame, with eligibility effective no later than the month following receipt of the request per Section 401.1.I.

3. Evaluation of Reported Information - To ensure the applicant/recipient has provided all information necessary for the worker to make a proper determination regarding eligibility, every element on the SOF must be discussed with the client at each application or renewal.

Additionally, when a change is reported by the client, all elements related to the change must be reviewed to ensure continuing eligibility exists.

When statements, either written or verbal, made by the client are deemed questionable, further evaluation of the client's circumstances is required. Questionable information will include, but is not limited to, statements which are:

- a. incomplete or unclear;
- b. inconsistent with statements previously made by the applicant/recipient;
- c. inconsistent with information known by the local agency.

4. Income v. Expenses - In situations where it is obvious the client's monthly expenses exceed verified income, the worker shall discuss with the client how monthly expenses are being met. The worker may not require verification of the client's expenses as a condition of eligibility. Furthermore, assistance may not be denied or terminated based solely on statements made by the client. Rather, the worker shall take this opportunity to explore the client's situation to determine if unreported income **is** available which **allows** the assistance unit to meet monthly expenses.

* 45 CFR 233.20(a)(1)(v)

The case record must be clearly documented to accurately reflect the client's substantiation of his/her situation. If the worker and the client are unable to resolve the client's circumstances, attempts to do so must also be documented in the case record. It is important to remember, however, that assistance can only be denied/terminated when income **is** uncovered which, when verified, exceeds prescribed limits or when the client acknowledges he has unreported income but refuses to verify the source and/or amount.

5. Follow-Up on Suspected Unreported Income - When the agency has reason to believe that a recipient is receiving income that has not been reported, the eligibility worker will follow-up on obtaining information to substantiate the recipient's circumstances. Community complaints, expenses exceeding income, a history of not reporting, and cases with individuals living with the assistance unit whose income would be deemed available are examples of the situations which may indicate the need to solicit additional income information. Forms are available in ADAPT that may be used for this purpose. The case record must be documented regarding the agency's reason for sending the income form. However, the income form is not an eligibility requirement; therefore, negative action cannot be taken for failure to return the form. If the agency chooses not to use the income form, the case record must contain documentation of the attempts to clarify the possibility of unreported income.

- C. Face-to-Face Interviews - A face-to-face interview by the eligibility worker is required at the time of initial determination and at least every 12 months thereafter. The face-to-face interview shall be used to obtain verification and to secure information necessary to complete the application/redetermination process. The interview may be conducted in the office of the local agency, the home of the applicant/recipient, or a place agreeable to both parties. Home visits may be deemed necessary or appropriate by the local department.

- b. All adult members of the assistance unit are disabled as evidenced by receipt of income payments, such as SSI or Social Security Disability payments. Refer to the Definitions Section of the Food Stamp Certification Manual for a complete list of persons considered disabled for purposes of interim reporting;
- c. All assistance units that are homeless (lack a fixed address and regular nighttime residence). Refer to the Definitions Section of the Food Stamp Certification Manual for a complete definition of persons considered homeless; and
- d. **Any adult member of the assistance unit who is a** migrant or seasonal farm worker (worker who **has** to travel to do farm work and who **is** unable to return to **his** permanent residence in the same day while doing farm work on a seasonal or temporary basis). Refer to the Definitions Section of the Food Stamp Certification Manual for complete definitions of migrant and seasonal farmworkers.
- e. **All payee cases where the payee is a specified relative other than a parent or is a parent receiving SSI.**

All other assistance units are subject to interim report filing.

- I. Interim Report Filing - An assistance unit that is required to file the Interim Report must have a 12-month renewal period. On or about the twentieth of the fifth month of the renewal period, the State Department of Social Services will create and mail the Interim Report to all assistance units so identified by the EW in ADAPT. Upon identifying cases due an Interim Report and producing the information for the Interim Report each month, the ADAPT system will suspend the case's eligibility. A list of cases sent the Interim Report and a copy of the Interim Report for the household will be available to the local agency through the Data Warehouse.

- 1. Client Responsibilities

The assistance unit must complete the Interim Report and return it to the local agency by the fifth day of the sixth month. If a change in circumstances is reported, the assistance unit must supply verification of the changed elements. The assistance unit must provide additional information or verifications as requested by the local agency within the time allowed. In TANF only cases, the caretaker (parent or specified relative with whom the child is living) or an authorized representative designated by the caretaker must complete the Interim Report. In joint TANF/Food Stamp households, the form may be completed and signed by any responsible household member or authorized representative.

2. Agency Responsibilities

The local agency must review the list of cases sent the Interim Report against the returned forms. If an assistance unit fails to return the form by the fifth day of the sixth month of the renewal period, the agency must send the assistance unit another form along with the Interim Report Form - Request for Action (032-03-649). The assistance unit will have 10 days from the mail date to return the second Interim Report.

- J. Interim Report Evaluation - The agency must assess Interim Report forms received from assistance units. Note: The assistance unit does not need to submit verification of self-employment or contract income that has been averaged.
1. Interim Report Returned Timely - If the assistance unit returns the Interim Report timely and there are no changes in circumstances, the EW must rescind the suspension and reinstate the case in ADAPT. If there is a change in eligibility or grant amount as a result of information received on the Interim Report, the grant must be revised and an adequate notice sent.
 2. Interim Report Not Returned Timely - If the returned Interim Report is incomplete or lacks required verifications of reported changes, the agency must send the Interim Report Form - Request for Action (032-03-649), and the original Interim Report to the assistance unit. The unit will have 10 days to supply information, verification, or to complete the form. The agency must photocopy the incomplete Interim Report before sending the form back to the assistance unit.

The agency must consider the report incomplete if:

- The form is not signed by an individual listed in Section 401.3.I.1;
- The unit fails to submit verification of changed income, residency, **or assistance unit members**;
- The unit fails to provide information needed to determine eligibility or benefit level; or
- The unit failed to address all questions.

If a completed Interim Report and required verification are returned within the 10-day time frame, the EW must make adjustments, as needed, to reflect information from the Interim Report in eligibility or benefit amount effective the seventh month. The EW must notify the assistance unit of the benefit calculation based on the Interim Report for the second half of the renewal period and act to reinstate the case in ADAPT after the evaluation of the Interim Report. The agency must provide an adequate notice to notify the assistance unit of the benefit calculation.

The following procedures are to be followed in preparing the Advance Notice of Proposed Action Form:

1. The form must be mailed to the recipient at least 10 days, whichever is deemed appropriate in accordance with the definition of "timely," before the action taken is effected.

- a. When the action being taken is a reduction, neither the date of mailing nor the effective date is included in the ten (10) days.

Example: Advance Notice of Proposed Action is mailed on the 20th day of June, indicating reduction of assistance effective July 1.

- b. When action is being taken to suspend or terminate benefits, neither the date of mailing nor the date of nonissuance (the first day of the following month) is included in the 10 days.

Example: Advance Notice of Proposed Action is mailed on April 20, indicating that assistance will be terminated effective April 30.

2. The notice must include a statement of what action the agency intends to take.
3. It must include the reasons for proposed action. If the proposed action is to suspend assistance due to the inability to verify a change in the client's circumstances (see Section 401.2.B.2.), the Advance Notice of Proposed Action must also include a statement that if necessary verification is provided, assistance will not be reinstated if such verification renders the case ineligible
4. The specific policy citation requiring the proposed action must be entered.
5. In cases of grant reduction, the new amount of the grant must be entered.

- D. Action Requiring TANF Match Payment Change Notice - A TMP change notice will be sent monthly to each TANF case scheduled to receive a TMP in the following month. The State Department of Social Services will send the change notice only to the assistance units actually affected by the change. The notice will include an explanation of fair hearing rights and responsibilities.

Assistance units must receive the notice no later than the benefit availability date.

- E. IPV Notice Requirements - Refer to Sections 102.5, 102.8 and 102.13 regarding notice requirements relating to IPV policy and ADH procedures.

- F. Neither an advance notice nor an adequate notice is necessary when the assistance unit fails to return a completed Interim Report, provided the agency mailed the assistance unit an Interim Report Form - Request for Action form and another Interim Report or the original incomplete form.

401.5 INFORMATION TO BE GIVEN APPLICANT/RECIPIENT -

In the process of determining eligibility, the worker must provide the applicant/recipient with the following information:

- a. The applicant/recipient's responsibility to provide accurate and complete information to the best of his ability.
- b. Information Regarding Timely Reporting of Changes
 1. Applicants are responsible for reporting required changes within 10 days of the date of the Notice of Action to approve. Required changes that occurred after the face-to-face interview, but before the Notice of Action to approve must be reported within this 10-day time frame.
 2. Recipients of TANF must report income changes when the total income exceeds 130 percent of the federal poverty level based on assistance unit size at the time of approval or the Interim Report evaluation, as outlined in Section 401.2.B.2.
 3. Recipients are required to report address changes (a new physical or mailing address) within 10 days of the change.
 4. **Recipients must report when an eligible child leaves the home.**
 5. VIEW participants are required to report changes in gross countable income of greater than 130 percent of the federal poverty level based on size of the assistance unit, other changes pertinent to participation in VIEW, including changes in the need for supportive services.
 6. Assistance units must complete an annual renewal, unless a shorter renewal period is required by Food Stamps. In addition, an interim report must be submitted by the sixth month of the renewal period.

Applicants/recipients must be advised of changes not required to be reported that may increase benefits, such as loss of income and additional family members in the home.

c. Liability for failing to report changes.

d. Methods of Reporting

The Change **Report (032-03-051)** must be given, with an explanation of its use.

Changes may be reported by telephone, in person, or in writing.

e. The agency's responsibility to complete the application within 45 days from the date of application or make indicated changes in amount of payment as necessary.

f. The applicant/recipient's right to appeal if action is not taken on his application or request for an increase within the required time period of if he is dissatisfied with the agency's action.

- g. The requirements with respect to nondiscrimination.
- h. Social services provided by the agency.
- i. Family planning and early screening, diagnosis, and treatment.

All applicants must be informed of the availability and importance of preventive health screenings (EPSDT) for children up to age of 21. EPSDT or Early and Periodic Screening, Diagnosis and Treatment is a program that focuses on the early identification of health problems through periodic well-child assessment, immunization and follow-up care to resolve any identified health problems. All Medicaid recipients up to the age of 21 are eligible to receive EPSDT services. EPSDT does not require any additional enrollment procedures. Discussion about EPSDT services should be supplemented by reviewing either the EPSDT section of the Temporary Assistance Programs booklet or the Department of Medical Assistance Services (DMAS) EPSDT brochure with the applicant.

Most recipients will be enrolled in a Medicaid managed care program and, as a result, should be encouraged to contact their MEDALLION Primary Care Physician (PCP), Health Maintenance Organization (HMO) or the MEDALLION Care Helpline at 1-800-643-2273. Non-managed care eligible recipients should also call the MEDALLION Care Helpline to receive a list of Medicaid enrolled doctors or clinics that provide EPSDT services. The recipient should be informed that transportation is provided for EPSDT services at no charge. If the recipient has any difficulty accessing EPSDT services or has questions or concerns about EPSDT or transportation to an EPSDT provider, they should contact the MEDALLION Care Helpline.

You may also contact the DMAS EPSDT program administrator at 804-786-0194 if you have any questions or concerns regarding EPSDT program policies or procedures.

- j. The need to substantiate all eligibility factors.
- k. The categorical eligibility requirements and conditions of eligibility for TANF.
- l. The requirements regarding composition of the assistance unit, that required unit members are considered part of the unit even if application has not been made on their behalf, and that the client's failure or refusal to provide verification of categorical requirements for a child required to be in the assistance unit, or the child's failure to meet conditions of eligibility, will result in the child's needs being excluded from the assistance unit but his income will be considered available to the remaining assistance unit members.

- m. The provisions of cooperation in relation to the Child Support Enforcement Program. The client must be informed of the responsibility to assist the State or local agency and the consequences for refusing to cooperate, unless good cause for refusing to cooperate has been determined to exist. The applicant/recipient must be given the opportunity to withdraw the application or request the termination of assistance, before the next payment is issued. The appropriate notice must be sent in either situation.
- n. Provisions regarding income and the method by which income will be counted; the lump sum provisions including how the money will be considered for future months (Section 305.4.C.), and the provisions regarding casualty property loss payments. Also, the provisions for shortening the period of ineligibility according to Section 305.4.C. must be explained when a case is closed due to the receipt of a lump sum.
- o. Provisions concerning treatment of child care/incapacitated adult care disregard as it relates to an individual's employment status and eligibility determination (Section 305.3.B.6.). The applicant/recipient must be given the opportunity to choose either the child care disregard or the child care vendor payment to the provider.
- p. Standard of assistance
- q. Under the VIEW Program, the requirements of the program, the conditions for exemption from this requirement and that all recipients will be notified via mail of specifics regarding participation upon approval of their application. Additionally, the requirement to report all changes relative to VIEW status and the condition of eligibility to participate, if required, must be explained. See Section 901.2 for further details of explanation.
- r. Verification of Information - The applicant/recipient must be advised that all factors of eligibility are verified and that public records, such as Bureau of Vital Records and Health Statistics, etc., are utilized in this effort. The applicant/recipient should also be advised that the records of Virginia Employment Commission (VEC) and Social Security are periodically checked for income.

- s.** Upon receipt of a notarized acknowledgement of paternity form, notify the applicant/recipient that paternity has been established.
- t.** The applicant/recipient must be advised that if any individual who is included in the A.U. does not have a SSN it must be provided or proof of application must be provided.
- u.** The applicant/recipient must be advised that when current support, greater than \$50, is being collected by the Division of Child Support Enforcement, the TANF recipient may receive a TANF Match Payment per Section 304.4.
- v.** Provisions regarding continuation of DCSE services following the termination of assistance.
- w.** The provisions described in Section 401.1.A. regarding the single interview and joint application process for TANF and food stamps must be explained to the applicant/recipient.
- x.** Provisions for transitional child care benefits per Section 401.7.
- y.** In situations where the assistance unit is homeless, the worker must explain the need for the caretaker to keep in contact with the local agency and/or frequently check the mutually agreed upon destination where correspondence and checks will be mailed. The case record must be documented to reflect where the unit wants to receive notices and checks.
- z.** Provisions of the family cap policy per Section 201.12.
- aa.** 60-month limit on receipt of TANF provision.
- bb.** The applicant/recipient's right to voter registration services in accordance with the National Voter Registration Act of 1993. Refer to Appendix II of Chapter 400 for applicable policy.

The worker must explain that certain contacts, when appropriate, require written consent (i.e., doctors, banks, etc.).

In addition to being given the above information orally, the applicant must be given the "Temporary Assistance Programs" booklet (Form #032-01-002), the "Virginia Medicaid Handbook," and the "Child Support and You" booklet (Form #032-01-945). A recipient who indicates at the time of the review that he does not have a copy of the Temporary Assistance Programs booklet must be given a copy.

401.6 IMPACT ON MEDICAID

See the Medicaid Manual, Volume XIII, to determine Medicaid eligibility for TANF applicants/recipients.

402.1 INCOME ELIGIBILITY VERIFICATION SYSTEM (IEVS)

Section 1137 of the Social Security Act requires states to coordinate data exchanges with other federally assisted benefit programs and to use that information when making eligibility determinations for TANF recipients. The federal statute requires that information obtained through these data exchanges be verified by a third party, not the IEVS source, prior to impacting the eligibility of the TANF case or the amount of benefits. The exception to the prior statement is Social Security benefits. Chapter D, page 7, of the IEVS Manual provides instruction to local departments of social services in the use of the information obtained through IEVS. Local workers must complete a Benefit Impact Statement for each TANF case for which it receives an IEVS match.

The Income Eligibility Verification System (IEVS) provides information by running matches of the client population against the files of other state and federal agencies. These include:

- the Social Security Administration for SSI benefit information (SDX) and earnings information from the Benefit Exchange Earnings Records (BEERS);
- the Virginia Employment Commission for NEW HIRE information; and
- the Internal Revenue Service for unearned income, such as interest (RES).

The purpose of the matches is to determine whether available information is known to the local social services department.

Information about SSI benefits from the SDX is considered verified upon receipt because the provider of the benefits (SSA) is also the source of the information. The local agency must take action to terminate, deny or reduce benefits, including proper notices to the assistance unit, without needing additional verification. If the information, however, is questionable, the agency must resolve the discrepancies before taking action.

Information from other IEVS matches is considered unverified. Prior to taking action to terminate, deny or reduce benefits, agencies must independently verify the amount of the asset or income involved, and whether the asset or income is or was accessible to the assistance unit.

The agency must obtain independent verification of information obtained from IEVS by contacting the assistance unit and/or the appropriate source of the income. If the agency opts to contact the assistance unit, the contact must be in writing, informing the assistance unit of the information received, and requesting that the assistance unit respond within 10 days. If the assistance unit fails to respond in a timely manner, the agency must send an advance notice to suspend or terminate the case. The agency may contact the appropriate source of the information. Once independent verification is provided, either by the assistance unit or the source, the agency must properly notify the assistance unit of the action it intends to take and provide the assistance unit with an opportunity to request a fair hearing prior to any adverse action.

VIRGINIA LEGAL AID PROJECTS

See Food Stamp Manual, Volume V, Part XIX, Appendix I, for a list of Virginia Legal Aid Projects with addresses, phone numbers, and areas served.

502.1 AMOUNT OF PAYMENT -

A. In the TANF Program - The amount of the monthly payment is the amount of the budgetary deficiency (the appropriate standard of assistance for the assistance unit, as specified in Section 304, less countable income, as specified in Section 305), plus the TANF Match Payment, if any, adjusted to the next lower dollar, except as provided below:

1. Maximum Reimbursable Payment in TANF - Because of limitation in State funds in the TANF category, the State Board has approved for purposes of reimbursement to localities:

- a. A ratable reduction in the standard of need for TANF.
- b. An overall maximum amount of payment established for each group of localities, as shown in Appendix 2 to Section 304.

Any locality wishing to meet up to the full (100%) standard of need and/or to meet the full budgetary deficiency, even though in excess of the maximum reimbursable amount may do so provided (a) the full (100%) standard of assistance is not exceeded in determining need; (b) the additional cost is paid from local funds and (c) the percentage of need met and/or the policy with respect to payment are used in all cases in the locality.

Note: When a TANF Match Payment is included in the monthly payment, and the TANF benefit, plus the TANF Match Payment, exceeds the maximum for the assistance unit, the maximum will not apply and the full amount of the combined payment will be issued. However, the amount representing the TANF benefit must not exceed the maximum for the size of the assistance unit.

2. Minimum Payment - If the budgetary deficiency is less than \$10.00, no payment is made. However, if an assistance unit's ineligibility is based solely on this minimum payment provision, the case will be approved and retained as an active TANF case.

The minimum payment rule does not apply when a combined payment (monthly benefit plus TANF Match Payment) is issued. The check will be issued provided the combined payment is at least \$1.00.

The receiving locality is responsible for completing a **desk review** and reflecting any other changes affecting eligibility or payment for the first of the month following the month in which the transferring locality specifies as the last month they will make payment. This is the payment month for which the receiving locality will assume responsibility for the accuracy of the payment. If the receiving locality will not be approving the case, or will be approving it in an amount less than the prior payment, they are responsible for sending the Advance Notice of Proposed Action to the client.

There are no circumstances under which it is permissible for the receiving locality to return the case to the transferring locality (other than the recipient subsequently moving back to the original locality).

- C. Provision of Services - In protective situations referral to social services staff must be made, to assure protection of recipients, where problems and needs for services are obviously beyond the ability of the protective payee to handle.
- D. Periodic Review of Need for Protective or Vendor Payment - A review of the need for protective or vendor payments in behalf of children and of the way in which a protective payee's responsibilities are being carried out will be made as frequently as indicated by the individual circumstances and at least every six months, or 12 months if appropriate. This review can be coordinated with the eligibility **renewal**. When the protective or vendor payment is made in accordance with Support Enforcement Program, the review is only to assess the way in which the protective payee carries out his/her responsibility. The need for such payment is already established.

Appropriate controls are to be established by the local department to insure that cases are reviewed within the specified period. The case narrative should include an evaluation of the situation at the time of review and a statement of the basis for the decision at that time to continue or to terminate protective or vendor payments.

- E. Termination of Protective and Vendor Payment - Provision is to be made for appropriate termination of protective or vendor payments as follows:
1. When the grantee-relative is considered able to manage funds in the best interest of the children, there will be a return to money payment status.

When it appears that the need for protective payment will continue or is likely to continue beyond two years, because all efforts have not resulted in sufficiently improved use of assistance in behalf of the children, judicial appointment of a guardian or personal representative will be sought. When such an appointment has been made, payment will be made to the guardian or personal representative.
 2. Protective or vendor payments made on the basis of a caretaker-relative's failure to cooperate in establishing paternity, locating absent parents or in securing support, will be terminated with a return to money payment status only when the caretaker-relative complies with these conditions of eligibility.
 3. Protective payments made on the basis of a caretaker's failed drug test will be terminated after one year.
- F. Right of Appeal - Opportunity for a fair hearing will be given any recipient:
1. In relation to the determination that protective or vendor payments should be made or continued, or

- B. The error was not the result of an anticipated change that was overlooked.
- C. The error was not the result of the client reporting a change that the agency failed to follow-up on.
- D. The error was not the result of failure to use available management tools.
- E. The case record must be thoroughly documented regarding efforts to obtain information.

503.3 PERIOD SUBJECT TO REPAYMENT Overpayments and payments to ineligible which shall be repaid to the State will be assessed for each month (effective April 1, 1973) in which the recipient fails to report earned or unearned income from a new source or other changes, such as composition of the assistance unit, etc.; for each month the agency failed to take appropriate action within the time limit specified on a change reported by the recipient; or for any incorrect payment which is identified by Quality Control.

503.4 COMPUTATION OF REPAYMENT Standards and policies which are in effect at the time of the improper payment shall be used in determining the amount of repayment to be made. A standard and/or a policy is considered in effect in relation to a specific case after the date when (1) a standard or policy has become effective by State Board action in all cases or (2) a standard or policy has become effective in new and reviewed cases and the particular case is (a) a new case, (b) a case in which a review is due or (c) a case in which a change in circumstances has necessitated a partial review. Exception: Recoupment/recovery policy in effect at the time of discovery of the overpayment(s) is to be used in determining the amount to be repaid.

When an overpayment to an ineligible has been identified by the state or federal agency, a report is submitted promptly to the local department. Ten (10) working days, from the date the report was sent to the locality, is allowed for the agency to concur or register its exception to the findings with the regional office utilizing the concurrence memo. The regional office will provide an opportunity for resolution of the differences and render decisions within thirty (30) working days. The resulting decision is subject to appeal to central office. However, only appeals in which the final decision was not made in accordance with established policy will be accepted.

3. Discuss methods of repayment with the individual. If the individual refuses to cooperate, secure a written statement from the individual that he refuses to repay the overpayment.

Once reasonable efforts to collect the overpayment have proven to be unsuccessful, the agency must document the case record with evidence that further recovery efforts would equal or exceed the amount of the overpayment. Such evidence may include the cost of staff time, the cost of legal/attorney fees, or any other evidence the agency has which demonstrates that further recovery efforts would not be cost-effective. The agency head, or his designee, will make the final determination as to whether further efforts would be cost-effective.

- C. Retention of Information - The agency must maintain information on individuals no longer receiving assistance who received an overpayment which was waived, including overpayments less than \$35. The agency must initiate recoupment procedures should one or more of those individuals again be found eligible to receive assistance.
- D. Intentional Program Violation (IPV) - In situations involving a TANF/VIEW IPV, the agency must make every effort to collect the overpayment regardless of the amount; the overpayment may not be waived. See Section 102 for policy on handling Intentional Program Violations (IPV).

503.7 - Calculating Overpayments - There are several factors which must be considered when calculating overpayments (IPV and non-IPV).

- A. Determination of Continued Eligibility - When any change in circumstances which caused an overpayment is still in effect at the time of discovery, the agency must first prospectively determine the client's continued eligibility.
- B. Determination of When the Overpayment Began - The worker is to determine when the overpayment began and secure all verifications necessary to calculate the overpayment. The overpayment began in the month the change occurred if the source of the overpayment is:
 1. SSN or application for a SSN for a newborn
 2. the receipt of a lump sum which did not meet the reported timely requirement or when combined with other income is less than 100% of need,

If the overpayment is the result of any other factor, excluding the receipt of a lump sum which met the reported timely requirement or was equal to or more than 100% of need, the overpayment began the month following the month the change occurred.

Assistance payments issued and payment reductions delayed as a result of the advance notice period are not overpayments. Refer to the examples below:

Example 1: On April 27, Mrs. Smith reports new employment. A prospective determination reveals that Mrs. Smith's May income is going to exceed need. Due to the advance notice period, the worker cannot close the case until June 1. The May payment is not an overpayment.

Example 2: On August 5, Ms. Carter reports her new job. Although the information is reported timely, the agency fails to take action to reflect the anticipated income for September. Since the reason the September payment was not reduced or terminated was because of the agency's failure to act and not the advance notice requirement, the September payment is an overpayment which must be recouped/recovered.

- C. Impact on Earned Income Disregards When Calculating Overpayments - When calculating overpayments which are the result of the customer's failure to timely report receipt of earned income from a new source, the earned income disregards are not to be allowed in the 185% or standard of assistance screenings or in determining the amount of the correct payment.

The earned income disregards are applied in accordance with Sections 305.1.A and B. provided eligibility has not been exhausted, when calculating an overpayment resulting from:

- the agency's failure to act on a change in earned income which was reported timely,
- any action which cannot be taken due to the advance notice period, or
- payments issued pending an appeal decision.

Only those months in which the \$30 plus 1/3 or \$30 disregard was actually applied in determining the amount of assistance the customer should have received will be counted in determining the appropriate number of months of entitlement to the disregard.

- D. Support Related Overpayments - When an overpayment occurs which is the result of the client's failure to redirect support, the client's needs are not to be removed for purposes of calculating the overpayment.
- E. Income Related Overpayments - The local agency must determine the correct amount of the payment the assistance unit should have received for those months the assistance unit actually received an overpayment.* Using conversion factors of 4.3 and 2.15, if appropriate based on Section 305.1.B.2.b, screen the income at 185% and at the standard of assistance to determine the monthly payment amount. In cases involving changes required to be reported or payments made pending an appeal decision, the local agency must determine the month that the overpayment initially occurred and all other months as follows:
1. If, due to a misunderstanding or inadvertent error on the part of the assistance unit, an assistance unit failed to report a change in its circumstances within 10 days of the date the change became known to the assistance unit, the first month of an overpayment will be the first month in which the change would have been effective had it been reported in a timely manner.

In no event, however, may the local agency determine as the first month in which the change would have been effective any month later than two months from the month in which the change in income occurred.
 2. If the assistance unit reported a change within the prescribed time limits, but the local agency did not act on the change timely, the first month affected by the local agency's failure to act must be the first month the local agency should have made the change effective. Therefore, if an advance notice was required but was not sent, the local agency must assume that the maximum advance notice period as provided in Section 401.4.C would have expired without the assistance unit requesting a fair hearing.
 3. If prospectively ineligible, the full assistance payment is an overpayment.
 4. If the prospective determination renders the case eligible, calculate each month's overpayment and apply earnings disregards as indicated in Section 503.7.C., if applicable.
- F. Overpayments Not Related to Income - If an overpayment is the result of any factor other than income, the overpayment is to be based on the actual circumstances of the case each month.

* 45 CFR 233.20(a)(13)

Example: In June the worker discovers that **an eligible** child left the home on August 5 of the previous year. The child should have been reported no later than **September 10**. Overpayments must be calculated beginning with the **October** payment. The overpayment amount is the difference between the grant received each month and the correct grant for the actual number of eligible members living in the household.

- G. Overpayments Resulting from Incorrect Composition of the Assistance Unit
When it is discovered that an individual required to be in the assistance unit is living in the home, it must be determined if an overpayment occurred. This determination is to be made as follows:

1. Redetermine eligibility for each month beginning with the month following the month the individual entered the home or was required to be in the assistance unit, including the individual's needs, **and** actual income. Any resulting overpayments must be recouped/recovered.
2. If during the period in which the individual was required to be in the unit he had no income or his needs exceeded his income, an underpayment has occurred only for the months in which all categorical requirements were met and the conditions of eligibility are retroactively deemed to be met per Section 401.2.B.2.c. (See Section 503.9.)

- H. Total support collected by DCSE, as identified on the Notification Report, must be deducted from TANF overpayments.

Example: A \$354 TANF payment was made for the month of April which included a \$100 Match Payment. The amount subject to recoupment is \$254, minus total support collected by DCSE in April (the month the overpayment occurred), which was \$75; therefore, the April overpayment is \$179.

- I. In localities meeting the standard of need, only the standard of assistance State/federal share of the TANF overpayment is to be reported to Financial Management. Each locality is then responsible for recovery of the local share of the overpayment directly from the client.
- J. Calculating a VIEW Overpayment - A VIEW overpayment occurs when a VIEW participant receives a payment or purchase on his behalf which is an amount greater than what he is eligible for or for which he is ineligible as a result of the client withholding or providing false information.

The worker must determine if the participant is still eligible for services and determine the correct cost of the services that the participant would continue to receive.

2. In situations where the client has earned income, unearned income, or any combination thereof, in addition to his assistance payment, part or all of the assistance payment may be recouped as long as the assistance unit retains at least 90 percent of the standard of assistance when the total gross income, the amount of the current grant is considered.
 - a. Determine the amount of the overpayment.
 - b. Combine all gross income (no earned income disregards apply) **and** the current grant.
 - c. Determine what 90% of the standard of assistance for a family of equal size in the same locality would be. This represents the amount of money the client must have available to live on.
 - d. The difference in Step b. and c. represents the client's ability to repay the overpayment.

The monthly assistance payment will be reduced according to (1) and (2) above until such time as the overpayment has been repaid. If, however, income and/or cash reserves have been counted in establishing the client's ability to repay, recovery of the overpayment may also be accomplished through voluntary repayment. This option is to be offered to the client prior to initiating a recoupment.

If recoupment reduces the grant to zero, the case will be retained as TANF eligible with no money payment.

- B. Recovery consists of making arrangements with a former or current recipient for voluntary repayment of all or a portion of the overpayment even though the client may no longer be eligible for assistance. If a former recipient fails to make the voluntary repayment, the agency must initiate action under Section **63.2-512**, Code of Virginia, to collect the amount as a debt. Failure or refusal of a current recipient to voluntarily repay the overpayment will result in court action only when recoupment is not possible and, thus, precludes prompt correction of overpayments as described in 503.7D, i.e., no grant from which to recoup due to a deficit of less than \$9.50.
- C. RESPONSIBILITY FOR OVERPAYMENTS - The allowable amount of recoupment or recovery of the overpayment from the client is limited to the total amount of the overpayments.
 1. When TANF benefits are overpaid, the caretaker-relative of the assistance unit at the time the overpayment occurred shall be primarily responsible for repayment of the overpayment. If that particular caretaker-relative is not available, and his whereabouts are unknown, then the overpayment is to be recovered from the remaining members of the assistance unit.

applied) in order to receive underpaid benefits. Additionally, when the agency discovers that a household was incorrectly denied/terminated, the former applicant/recipient must provide verification that the assistance unit was actually eligible for each month subsequent to the incorrect denial/termination. An underpayment will only be calculated for each month such verification is provided.

When it is learned that an underpayment has been made as a result of any (client or agency) error, there must be correction of the prior underpayment by repayment to the client as follows:

1. The total allowable repayment to the client shall be the amount of the underpayments.
2. Retroactive repayment of prior underpayments shall be made either in one lump sum payment or by monthly installment payments to the client until the full allowable repayment is made. The method of payment is to be selected by the local agency.
3. The retroactive corrective payment shall not be considered as income in determining need and the amount of the continuing assistance payment for which the recipient is eligible in the month in which it is paid or the next following month. The **TANF** maximum payment may be exceeded by the amount of such corrective payment.

The agency must also correct outstanding underpayments to former recipients who have reapplied and are found to be eligible.

The above instructions are not applicable when a corrective payment is made as a result of an appeal to the State Board or a court decision. In such cases, the terms of the State Board decision or court order apply.

At the time a grant is made or increased for the purpose of correcting a prior underpayment, the recipient must be informed in writing of the purpose of this special allowance; the amount and the period for which it will be made; and the fact that it will automatically terminate at the end of the specified period. If this is done and the recipient, at the time the special allowance is terminated, appeals within the advance notice period, assistance need not be continued in the original amount.

503.10 OFFSETTING OVERPAYMENTS AND UNDERPAYMENTS - In cases which have both an underpayment and overpayment, the agency will offset one against the other in correcting the payment.

701.3 ASSISTANCE UNIT TANF-UP

- A. The assistance unit is required to include one able-bodied natural or adoptive mother and one able-bodied natural or adoptive father, with at least one child in common and all minor siblings of that child(ren) who meet the categorical requirements listed in Section 201.1.A.

If one or both parent(s) meet the exemption criteria at 901.2 C. or D., the case is a TANF case, not a TANF-UP case.

Note: If the only child in common is ineligible due to 201.12, the assistance unit is still a TANF-UP assistance unit.

- B. If, after receipt of TANF-UP benefits, one parent leaves the home and another parent enters the home who has a child in common with the custodial parent and who qualifies for TANF-UP, a new assistance unit is established.

701.4 FINANCIAL CRITERIA

- A. All countable earned and unearned income of the assistance unit will be considered in determining financial need.
- B. The case is to be closed if the income of the assistance unit causes ineligibility.

801.1 PURPOSE

The diversionary assistance program was established by HB 2001, passed by the 1995 General Assembly. Authorized by Section **63.2-617** of the Code of Virginia, this program is intended to prevent potential TANF recipients from becoming ongoing TANF recipients. If immediate intervention with short-term aid will resolve a crisis situation and prevent the need for ongoing TANF, the assistance unit may be granted diversionary assistance.

801.2 SCREENING

The worker must explain the diversionary assistance program to all TANF applicants. The worker must screen all TANF applicants for eligibility for diversionary assistance at the time of application to determine if the applicant has an emergency, and whether diversionary assistance can resolve it. If so, the eligibility worker should determine if the client will volunteer for such a payment if otherwise eligible.

801.3 VOLUNTARY

The eligibility worker and the applicant must discuss the appropriateness of diversionary assistance to the applicant's situation. If the applicant meets the eligibility factors for diversionary assistance, he may decide whether or not to receive diversionary assistance rather than TANF. Receipt of diversionary assistance is voluntary and in every case requires the written consent of the applicant. All applicants for diversionary assistance must first sign the Acceptance of Terms of Issuance for Diversionary Assistance to be approved.

801.4 ELIGIBILITY FACTORS

Only applicants may be approved for diversionary assistance. Current recipients of TANF are not eligible. The applicant must verify all of the following factors and the worker must document the case record accordingly before an assistance unit can receive diversionary assistance:

- A. The applicant is eligible to receive TANF. A child is eligible for TANF by meeting the TANF requirements in Section 201.1 A. (categorical requirements). The conditions of eligibility in 201.1 B do not have to be met to be eligible for diversionary assistance. The parent or caretaker/relative shall be eligible for TANF unless one of the exceptions specified in 302.6 D or E is applicable. The caretaker/relative does not have to meet the conditions of eligibility (provision of a social security number, VIEW participation, compliance with the school attendance requirement, and cooperation with DCSE). However, if the caretaker/relative is under a VIEW sanction, the assistance unit is ineligible for diversionary assistance. Note: Case closure due to failure to sign the Agreement of Personal Responsibility is not a VIEW sanction. Therefore, a diversionary assistance case may be approved after a case was closed for failure to sign the Agreement of Personal Responsibility.
- B. The assistance unit meets TANF income limits;
- C. The assistance unit has a temporary loss of income or delay in starting to receive income; (such a loss of income cannot be a loss of TANF benefits) and
- D. The worker determines that diversionary assistance will resolve the emergency.

801.5 DETERMINING THE AMOUNT OF THE PAYMENT

The amount of the payment is based on the immediate needs of the applicant. However, the payment cannot exceed the total TANF payments that the recipient would otherwise be eligible to receive in four months. The amount of assistance is the maximum TANF amount for four months or the amount of the needs of the applicant, whichever is less. Local agencies shall strive to provide the most cost-effective appropriate solution to the one-time emergency. To determine the amount of the diversionary assistance payment, follow these steps:

- A. Calculate a maximum diversionary assistance amount - Compute the monthly grant amount counting any ongoing income, such as social security income. Income from a terminated source, or that has not started, is not considered ongoing for diversionary assistance purposes. Multiply the grant amount by four.
- B. Determine the needs of the assistance unit - Document the case record as to the needs covered and the verified cost of providing for each need. The amount can cover several different needs and can include items such as, but not limited to, shelter payments, utility payments, and transportation assistance.

Choose the most cost-effective appropriate solution to the applicant's needs. For example, if the emergency has created a need for transportation, the agency may calculate the cost of bus tickets versus the price of repairing a car.

- C. Compare the amounts in A and B - The lesser amount of A and B is the amount of the diversionary assistance payment.

Example: Ms. Z applies for diversionary assistance for herself and two children. Her car broke down, and she is unable to get to work. As there is no countable income, the maximum she can receive is \$1,280 ($\$320 \times 4 = \$1,280$). There is no other transportation available, and Ms. Z needs her car to get to work. Ms. Z provides verification the repairs to her car will cost \$900. Since \$900 is lower, the worker should approve diversionary assistance of \$900.

801.6 PERIOD OF INELIGIBILITY

- A. If an assistance unit receives a diversionary assistance payment, it shall be ineligible for TANF for up to 160 calendar days beginning with the date that the diversionary assistance is issued. (For payments by FMF, the beginning date is the date the worker completes the FMF.) To determine the period of ineligibility follow these steps:
 1. Determine the monthly amount of TANF for which the applicant is eligible. **If an IPV has been committed, exclude the disqualified individual's needs. Follow IPV procedures in Section 102.3.A.**
 2. Divide the amount determined in Step 1 by 30. This is the daily amount of assistance.
 3. Divide the diversionary payment amount by the daily amount determined in Step 2 to determine how many days are covered in the payment amount. Round up to the next whole number.

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VIEW participants do not have earned income screened at 185% and the standard of assistance. They may receive \$30 and 1/3 disregard, \$30 disregard, standard work deduction, and child or adult care costs as stated in 305.3 as disregards. The exceptions to allowing disregards in 305.3 also apply. When the TANF payment is suspended due to non-compliance with the VIEW program, the suspension does not interrupt the accumulation of the four consecutive months of the \$30 plus one-third disregard or the eight months of the \$30 disregard, and these months apply in the consecutive month count.

Example: A case has used 3 months of the \$30 and one-third disregard (July - September). The third VIEW sanction is imposed effective October 1. October counts as the fourth month of the \$30 and one-third disregard, and the \$30 disregard begins for November.

To calculate the VIEW payment (TANF grant), the eligibility worker must follow the steps in Appendix 1 to this chapter. The TANF Match Payment is not considered in calculating the VIEW payment.

The standard work deduction, the \$30 plus one-third of the remainder and the \$30 disregard are not applicable for a period of one month, in instances where the change in income is not reported timely per Section 305.1.F.1.a. (See Chapter 900, Appendix 2, page 5, for an example.)

See Chapter 900, Appendix 1 for the VIEW Grant Calculation, Appendix 2, for VIEW Income Examples, and Appendix 3 for the Federal Poverty Level table.

A TANF recipient who enters the VIEW program erroneously, i.e., the recipient did not report earnings that he received or expected to receive prior to entering VIEW that would have made the case ineligible for assistance using the 185% and standard of assistance income screenings, must have continuing eligibility determined by using 185% and standard of assistance screenings (see Section 305.1.A.) If the case does not pass the 185% and standard of assistance screenings, the case must be closed as soon as administratively possible. If the case is eligible at the standard of assistance screening, the VIEW grant calculation is appropriate for the month following the month in which the earnings were reported to the agency. Overpayments should be calculated per 503.7.

Note: For a case that contains an individual who is a VIEW participant, the VIEW grant calculation applies to the total countable earnings of all required assistance unit members.

901.8 VEHICLE VALUE LIMIT - **Repealed effective December 1, 2003.**

901.9 TWENTY-FOUR MONTH LIMIT FOR TANF ELIGIBILITY - An assistance unit participating in the VIEW Program is limited to twenty-four months of TANF eligibility. The twenty-four months of eligibility is an accumulated period of time, which includes any month that an individual was a mandatory participant on the first day of the month. The time clock is counted automatically by ADAPT, triggered by the date the Agreement of Personal Responsibility is signed and entered by the **eligibility** worker.

901.13 TRANSITIONAL BENEFITS - When a VIEW case closes, the family may be eligible for Medicaid and up to one year of, child care, transportation, and employment and training.* Receipt of Medicaid during the VIEW 12-month transitional period does not affect calculation of the 24-month period of ineligibility. Eligibility criteria for transitional benefits are found in:

- A. Medicaid Manual Volume XIII, Section M0320.306 (Low Income Families with Children (LIFC)) and M1520.500 (Extensions of Medicaid Coverage), for Medicaid;
- B. Child Care policy manual for transitional child care;
- C. TANF Manual, Chapter 1000, for transitional transportation and transitional employment and training.

901.14 FULL EMPLOYMENT PROGRAM - The Full Employment Program (FEP) is subsidized, training-oriented employment which replaces the TANF and Food Stamp benefits of a participant. The TANF grant and the Food Stamp allotment are diverted to a wage pool from which the employer is reimbursed up to the full amount of the combined benefits. The employer pays the recipient wages for hours worked through the employer's regular employee payroll.

- A. TANF GRANT DIVERTED TO WAGE POOL - The eligibility worker must suspend the payment to the recipient when notified by the VIEW worker of the FEP placement. The TANF grant amount that is diverted to the wage pool for the duration of the FEP contract months is "frozen" at the amount the assistance unit received in the first of the month payment for the month the VIEW worker places the recipient in FEP. The "frozen" grant means that the amount of the grant does not change during the FEP placement no matter what changes occur in the assistance unit. Diversion of the grant to the wage pool continues through the month in which the FEP placement ends.
- B. TANF ELIGIBILITY DURING FEP PLACEMENT - A participant will remain eligible for TANF for the period of the placement in the subsidized job. If a redetermination is due anytime during the FEP placement, the eligibility worker must change the date of the review to coincide with the last month of the FEP placement. A redetermination must be done that month to determine eligibility for TANF after the placement ends.

The recipient is required to report changes during the FEP placement. The eligibility worker must update ADAPT with changes. If the redetermination is not due the last month of the FEP placement, ongoing eligibility must be prospectively determined for the month following the placement, taking into account any changes that occurred during the placement. Any wages received from employment that are no longer subsidized must be counted.

The eligibility worker cannot issue a payment to the recipient for any months included in the FEP placement. Only retroactive payments for a month prior to the FEP placement can be issued. Central Office Financial Management will issue the employer subsidy check and the recipient supplement (if appropriate) for months included in the FEP payment.

*2002 Acts of Assembly, Appropriations, Item 354C

*VIRGINIA INITIATIVE FOR EMPLOYMENT NOT
WELFARE (VIEW) ANNUAL PLAN
State Fiscal Year 2004
July 1, 2003 to June 30, 2004*

Submitted by: _____
(Name of Local DSS)

*Virginia Initiative for Employment
Not Welfare (VIEW) Coordinator:* _____
(Signature) (Date)

(Print Name)

Local Director: _____
(Signature) (Date)

Date Received by the Virginia Department of Social Services: _____

VIEW Annual Plan

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State Fiscal Year (SFY) 2004 VIEW ANNUAL PLAN

Purpose of the VIEW Annual Local Plan

VIEW continues to be the centerpiece for Virginia's welfare reform program. The program is designed to assist participants in obtaining employment. The goals of the program are to:

- Offer Virginians living in poverty the opportunity to achieve economic independence by removing barriers and disincentives to work and providing positive incentives to work;
- Provide Virginia families living in poverty with the opportunities and work skills necessary for self-sufficiency;
- Allow Virginia families living in poverty to contribute materially to their own self-sufficiency;
- Set out the responsibilities of and expectations for recipients of public assistance and the government; and
- Provide Virginia families living in poverty with opportunity to obtain work experience through VIEW.

The VIEW plan provides each agency the opportunity to show how they have planned and evaluated strategies to meet the above goals for the next fiscal year, beginning July 1, 2003. The plan has a variety of purposes. It serves as a document to assist agencies in planning for the provision of services based on the allocation of funds from the state. It also serves as a monitoring tool for the state. Information from the local agencies can be shared as best practices. Agencies' projections will assist the planning efforts of the state.

Instructions are included. Local agencies may attach their Standard Operating Procedures (SOPs) to reduce or eliminate having to provide redundant information. Column L has been added to Attachment B, to identify vendors providing services for Job Retention and Wage Advancement Projects. On Attachment A, item Q a break down is requested for transitional employment and training.

The Annual Plan is due to Central Office by August 1, 2003.

VIEW Annual Plan

Instructions

I. VIEW Program Description

Review Section I and answer the questions. If the agency's SOPs (Standard Operating Procedures) include the information asked for in the VIEW Annual Plan, you may refer to the SOPs rather than restating the same information. If any answers refer to the SOPs, attach the SOPs to the Annual Plan. When referring to the SOPs be specific. (For example, see SOPs page 5, paragraph 2, item #1).

II. Program Participation Summary - Attachment A

Enter the agency's FIPS, the agency's name, a contact person's name, and phone number. The contact person is the person who completes the annual plan. The date submitted is the date sent received by Central Office. The fiscal year is 2004. Leave the revision number blank unless the agency is submitting a revision to the plan for the same fiscal year. All of the counts on Attachment A are annual projections for the period of July 1, 2003, to June 30, 2004.

Annual Projections - Attachment A

1. VIEW Participants

For item 1.A, enter the total number of VIEW participants the agency expects to serve from July 1, 2003, to June 30, 2004. Do not include participants receiving transitional services.

For item 1.B, enter the total number of VIEW participants the agency expects to enter into employment for the period July 1, 2003, to June 30, 2004.

Item 1.B.1 is the number of participants the agency expects to enter into part-time employment.

Item 1.B.2 is the number of participants an agency expects to enter into full-time employment.

2. Components

Review the listed components A through P and enter the total number of VIEW participants the agency expects to serve in those components from July 1, 2003, to June 30, 2004.

In item Q, Transitional Services, enter the total number of participants the agency expects to provide transitional services to from July 1, 2003, to June 30, 2004. For number 1, 2 and 3 enter the number of participants the agency expect to provide transitional employment and training, transitional child care and transitional transportation services.

3. Hard-To-Serve

For A, enter the total estimated number of participants with barriers to employment that the agency expects to serve from July 1, 2003, to June 30, 2004. This is a count of all clients who may have at least one of the listed barriers under the heading Hard-To-Serve. This is an unduplicated number.

For items 1 through 8, enter the number of participants the agency expects to serve that may face the specific barriers. These numbers may be duplicated because participants may have more than one barrier. Add the numbers for items 1 through 8 and enter the sum in item 9.

4. Hardship Exceptions

For item 4.A, enter the number of participants the agency expects to reach their 24-month time limit for the period of July 1, 2003 to June 30, 2004.

For item 4.B, enter the number of requests for Hardship Exceptions the agency expects to receive for the period of July 1, 2003, to June 30, 2004.

For item 4.C, enter the number of Hardship Exceptions the agency expects to be granted for the period of July 1, 2003, to June 30, 2004.

For item 4.C.1 through 4, enter the number of Hardship Exceptions the agency expects to be granted by reason for the period of July 1, 2003, to June 30, 2004.

III. Contracts and Interagency Agreements Summary -Attachment B

List each activity for which the local agency has a contract or an agreement on Attachment B.

IV. Employment Services Staff Report - Attachment C

Record the number of positions the agency has and the percentage of time that a position works with the VIEW Program.

I. VIEW Program Description

A. VIEW Population:

1. Briefly describe the VIEW population in your locality.

B. Employment Needs:

1. Describe the employment needs of the VIEW population in your locality.

C. Labor Market Trends:

1. Describe the current and anticipated labor market trends in your locality.

D. Community Work Experience (CWEP):

1. Describe the process for developing sites. Who is responsible for the development of sites? How many have been developed?
2. Describe the process for matching participants with the CWEP sites. List all of the agency's CWEP sites that the agency has a current contract with. What is the nature of work done by participants at the site?
3. Describe the process for monitoring work experience placements and indicate who has responsibility for monitoring.

E. Full Employment Program (FEP):

1. Describe how your locality will utilize this activity.
2. What strategies have been used for marketing and development of the sites?
3. How is the monitoring of placements be accomplished?

F. Job Retention, Job Upgrade and Job Follow-up:

In order to ensure participants are able to earn wages that will allow them to be self-sufficient after receipt of 24-months of Temporary Assistance for Needy Families (TANF), localities must develop strategies which allow participants to retain jobs and improve their monthly earnings during their participation in the VIEW Program. Below, please describe the strategies used to improve job retention and earnings.

1. Describe the process which the agency uses to assist participants in retaining employment.
2. Describe the activities in your job readiness classes that are designed to facilitate job retention and upgrade.
3. Describe the process the agency uses to provide job follow-up assistance to participants to identify and address problems which could lead to termination.
4. Describe supportive services available in your locality and how they are delivered to employed participants to enable them to look for and obtain better paying jobs and/or promotions.
5. Describe how the agency will determine if the participant voluntarily quit a job without good cause.

G. Welfare-to-Work:

1. Describe the criteria used to determine which clients will be referred to the Welfare-to-Work Program and the referral process.
2. Describe any strategies the agency has developed to encourage this population to actively participate in the WIA Program.
3. Describe the process of monitoring VIEW clients' participation in this program.

H. Working With The Hard-To-Serve Population:

1. Describe the characteristics of the hard-to-serve in your locality.
2. Describe the agency's plan to work with the hard-to-serve.
3. Describe the resources in your area that your agency utilizes in serving the hard-to-serve population.
4. Describe the flow of your program for the hard-to-serve when there is suspicion of substance abuse, a learning disability or any other situation the client may have that is a barrier to obtaining and retaining employment.

5. Describe how your agency tracks a hard-to-serve client's progress.
6. Describe how your agency has partnered with other organizations and agencies in your service area to serve the hard-to-serve.

I. Hardship Exceptions:

1. Describe the process the agency uses for determining eligibility for hardship exceptions and indicate who is responsible for the determination (individual worker or panel).
2. Describe any special services provided to participants receiving extended TANF benefits due to a hardship exception.
3. Describe who is responsible for obtaining hardship determination evaluations and providing them to the Regional Consultant.

J. Management and Monitoring:

1. Describe the procedure for ensuring that participants will be assessed within thirty days of the eligibility referral. How is this tracked and who is responsible for tracking?
2. Describe how the agency is ensuring that all VIEW participants are in a work activity by the 95th day of referral from the eligibility worker. Who is responsible for tracking this?
3. Describe how the locality ensures that all clients are continually assigned to a work activity.
4. List your contracts and the services each contract provides. Describe the locality's process for monitoring contracts. How are the expenditures tracked and how often? Who is responsible for developing and monitoring contracts? (Do not list fees in this response. Attachment B requests fees and other data.)

5. Describe how the agency tracks the annual plan to determine if performance measures are being met. Who is responsible for tracking the performance measures?

II. VIEW Program Participation Summary - Attachment A

Please follow the enclosed instructions for this section on pages iii and iv.

III. Contracts and Interagency Agreements Summary - Attachment B

It is very important to capture the data and information regarding contractors and the services they provide that assist clients in the VIEW Program. Please complete Attachment B to provide this information.

IV. Employment Services Staff Report - Attachment C

Attachment C is used to capture information on the staff and their position titles. It is also used to review the breakdown in caseloads when workers are working with more than one program.

The completed plan must be sent to Chris Raines, Program Consultant, TANF Unit, 730 E. Broad Street, Richmond, VA 23219.

VIEW PROGRAM PARTICIPATION SUMMARY	
ATTACHMENT A	
FIPS# _____	
Local Agency Name _____ Contact Person _____ Phone # _____	Date Submitted _____ Fiscal Year 2004 Revision # _____ From 7/1/03 To 6/30/04
	Annual Projections
	Participants
1. VIEW PARTICIPANTS	
A. Total # of VIEW Participants	
B. Total Participants Entering Employment	
1. Part - time Employment	
2. Full - time Employment	
2. COMPONENTS	
A. Job Search	
B. Job Readiness	
C. Education (ESL)	
D. Education (GED)	
E. Education (ABE)	
F. Education (High School)	
G. Post Secondary - Associate	
H. Post Secondary - Certificate	
I. Post Secondary - 4 Year Degree	
J. Job Skills Training	
K. On-the-Job Training (OJT)	
L. Work Experience (CWEP)	
M. Other Locally Developed	
N. Job Development and Job Placement	
O. Inactive	

Attachment A continued

P. Pending (Not Employed)	
Q. Transitional Services	
1. Transitional Employment /Training	
2. Transitional Child Care	
3. Transitional Transportation	
3. HARD TO SERVE	
A. Total # of Participants w/Barriers	
1. Substance Abuse	
2. Learning Disabilities	
3. Domestic Violence	
4. Physical Disabilities	
5. Mental Retardation	
6. Language Barriers	
7. Mental Illness	
8. Other (List)	
9. Total # of Barriers	
4. HARDSHIP EXCEPTIONS	
A. Participants That Will Reach the 24-Month Time Limit	
B. Participants Requesting a Hardship	
C. Participants Who Will Be Granted A Hardship	
1. Actively Seeking Employment	
2. Factors Relating to Employment Unfavorable	
3. Extension to Complete Education and Training	
4. Lost Employment Due to Factors Unrelated to Job Performance Inactive	

Contracts and Interagency Agreements Summary

Contracts and Agreements

Separate reimbursable contracts will be developed for VIEW even if the same contractor is used.

For each activity for which the local agency has a contract or an agreement list **enter on the form below**.

(A) Contractor/ Agency	(A1) FB	(B) Component	(C) Fixed Fee	(D) Performance Based	(E) Cost Based	(F) Number Served	(G) Contract Amount	(H) Public Non- profit	(I) Private For Profit	(J) Contract Period	(K) Job Placements	(L) JR/WA
Totals												

- | | |
|--|---|
| (A) List Contractor/Agency by Name. | (G) Enter applicable Amount to be paid to the contractor. |
| (A1) Faith Base Organization (Place an x in the box) | (H - I) Enter "yes" or "no" |
| (B) List Component/Service by Type. | (J) Effective Contract Dates (From: xxxx To: xxxx). |
| (C - E) Enter "yes" or "no" . | (K) Number of planned job placements, if appropriate. |
| (F) Enter the number of clients served. | (L) Enter Yes or No. Does this provider provide services for Job Retention /Wage Advancement projects? |

**VIEW Annual Plan
Attachment C**

Agency _____ **FY 2004**

Employment Services Staff Report

Position Title	% VIEW	% Other Programs

The following charts outline procedures for determining eligibility and amount of payment. They are divided into sections in relations to Manual Sections as follows:

Section I	Categorical Eligibility Requirements (Section 201)
Section IV	The Assistance Unit (Section 302)
Section V (Obsolete)	Property (Section 303)
Section VI	Requirement Items (Section 304)
Section VII	Income (Section 305)
Section IX	ESP/VIEW (Section 900)
Section X	Non-Cooperation with With DCSE (Section 201)

In the charts the left hand column lists each eligibility factor, with the Manual reference, and the facts which must be established in relation to each factor. The right hand column lists the acceptable methods of substantiating each fact, in the order of their acceptability, and, as applicable, methods of computation and procedures to be followed. When written statements are not specified, oral statements are acceptable, provided the source is identified and the statement quoted in the record.

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I.	<u>Categorical Eligibility Requirements (TANF)</u>	Section I.
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1.	If parent	pg. 2
2.	If not parent	pg. 4
C.	EWB Persons	pg. 5
V.	<u>Resources (Obsolete)</u>	Section V.
VI.	<u>STANDARDS OF ASSISTANCE (TANF)</u>	Section VI.
A.	Standard Allowance	pg. 1
B.	Total Allowable Individual Need	pg. 1
VII.	<u>INCOME</u>	Section VII.
A.	Earned Income	pg. 1
1.	Totally Disregarded	pg. 1
2.	Determination of Gross	pg. 1
3.	Determination of Assistance Payment	pg. 3
B.	Unearned Income	pg. 4
1.	Disregards	pg. 4
2.	Social Security and Other Benefits	pg. 5
3.	Support from Relatives	pg. 7
4.	Other Cash Income	pg. 9
5.	Contributions	pg. 10
IX.	<u>EMPLOYMENT SERVICES PROGRAM</u>	Section IX
X.	<u>GOOD CAUSE FOR NOT COOPERATING WITH SUPPORT ENFORCEMENT</u>	Section X

Facts to be EstablishedSubstantiation and Procedures2. Caretaker if not parentInclude if:

- a. he/she requests assistance;
and
- b. is not receiving SSI and/or
AG; and
- c. is in need
- d. is a citizen of the U. S.
or an eligible alien as
defined in Section 201.7 A.2.

Do not include if:

- e. needs met by spouse in home.

2. Caretaker not parent

- a. Client's statement or
- b. Agency knowledge.
- c. Verify income by methods
described in Section VII.
If net income (gross, less
work expenses) equals
allowable individual
requirements, caretaker
cannot be included.
- d. Verify as for parent-caretaker
(Section IV B.1.b.)
- e. If caretaker states spouse
living in home cannot
support, must determine net
income (gross, less work
expenses) of spouse (unless
spouse is SSI or AG
recipient). Determine his
ability to support his wife
(**TANF** caretaker) through
use of the full (100%)
standard of assistance
based on the number of
persons he is primarily
responsible for supporting
(himself, his wife and
their dependent children,
if any) and appropriate to
the locality group. If his
net income equals or
exceeds the full standard,
his wife (**TANF** caretaker)
cannot be included in the
AU. If his net income is
less than the full
standard, the caretaker is
included in the AU.
Support available from the
spouse is established by
comparing his net income to
the full standard of assis-
tance for the number of his

Facts to be Established

Substantiation and Procedures

Resources - Repealed effective December 1, 2003.

Facts to be EstablishedSubstantiation and ProceduresVI. STANDARD OF ASSISTANCE
IN TANFA. Standard of Assistance
(304.1)

Number of persons
In assistance unit
In (302.2)

B. Total Allowable Individual
Need
(304.2)

1. Amount allowed for
needs of one individual
in AU.

VI. STANDARD OF ASSISTANCE IN
TANFA. Standard of Assistance

Identify locality group from
Appendix 1 to Section 304.

Use figure for number of persons
in AU for appropriate locality
group from Appendix 2 to Section
304.

For agencies meeting the standard
of need, use appropriate figure
from Appendix 2 to Section 304.

B. Total Allowable Individual
Need

1. Divide the appropriate
standard of assistance by
the number of persons in
the AU to determine the
prorata share of each
person in the unit. This
prorata share is the total
allowable individual need.

Facts to be EstablishedSubstantiation and ProceduresB. Unearned IncomeB. Unearned Income1. Disregards:1. Disregards:

All unearned income specified in Section 305.4.A. is disregarded.

Disregard all unearned income in this section.

Facts to be EstablishedSubstantiation and ProceduresB. Unearned Income

d. Veterans benefits for educational purposes of individual 18 or older.

2. Social Security and Other Benefits - (305.4.B.)

Amount of monthly benefits received except as shown in a. and b. (below).

d. (1) Verify by award letter **or benefit payment check.**

(2) Verify if the VA Educational Grant is the individual's only source of assistance for education. If VA is the individual's only source of assistance for education, disregard the allotted amount of the benefit for that individual. No further verification is required.

(3) If the individual is also a recipient of a grant, loan, or scholarship, and it is verified that the VA benefit is used to help purchase one or more of the following items, the entire allotted amount of the benefit for that individual is disregarded: Tuition, books, fees, equipment required by the school, transportation to and from school if more than one mile away, or child care services if necessary for school attendance.

2. Social Security and Other Benefits (VA, Black Lung, RR Retirement, Unemployment Compensation, Workmen's Compensation, etc.)

Verify by:

Documents in client's possession -
Award letter or notice
Benefit payment check

Other sources -

Social Security Administration
(Form 1610 OR TPQY QUERY
RESPONSE)

Veteran's Administration
RR Retirement Board
UMW Union

Va. Employment Commission
Workmen's Compensation Board
Insurance Company or Fraternal
Organization
Confederate Pension Board

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